

DELETIONS, IF ANY: MATERIAL AFTER 1967

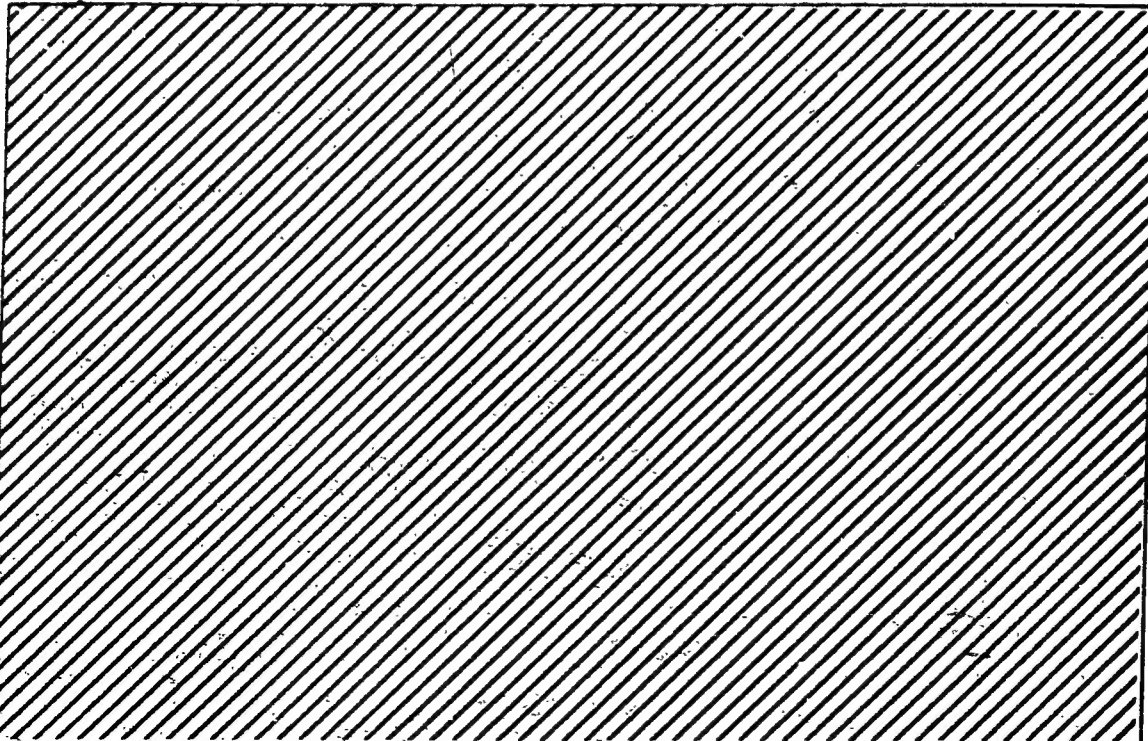
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FLURES DANIEL
460-48-6270

06/04/39

ADMINISTRATIVE - INTERNAL USE ONLY



NAME OF EMPLOYEE (Last-First-Middle) FLORES, Daniel	NAME AND RELATIONSHIP OF DEPENDENT* self	CLAIM NUMBER 79 0606
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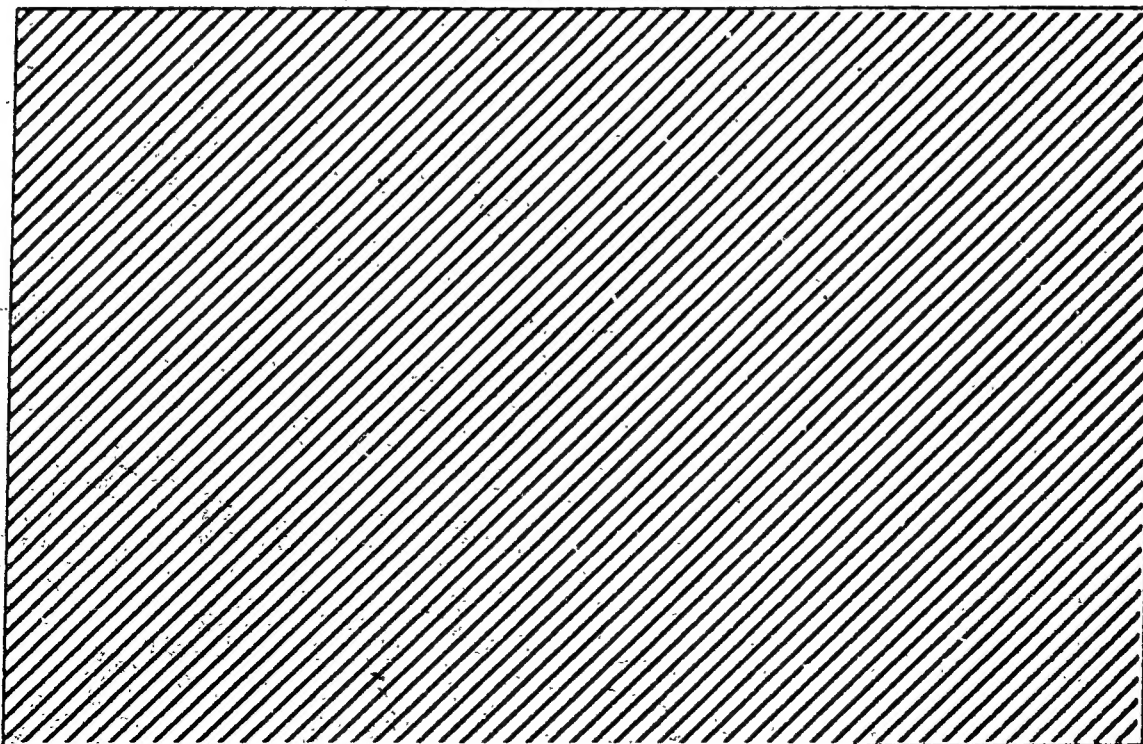
There is on file in the Personal Affairs Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on 1/4/79.

This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.

DATE OF NOTICE 7 Jun 1979	SIGNATURE OF BNC REPRESENTATIVE Arthur L. Hardt
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NOTICE OF OFFICIAL DISABILITY CLAIM FILE

ADMINISTRATIVE - INTERNAL USE ONLY



NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT*	CLAIM NUMBER
FLORES, Daniel	Self	78-0663

There is on file in the Personal Affairs Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on 4/12/78.

This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.

DATE OF NOTICE	SIGNATURE OF BPD REPRESENTATIVE
6/6/78	Ernest L. Baritt

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET
(If Not Filled In)

81 JAN 1978

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1 SERIAL NUMBER 036130				2 NAME (Last-First-Middle) Flores, Daniel	
3 NATURE OF PERSONNEL ACTION Reassignment			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 02 11 78		5 CATEGORY OF EMPLOYMENT Regular
6 FUNDS V TO V CF TO V			7 PAY AND NSCA 8035 0990 0000		8 LEGAL AUTHORITY (Completed by Office of Personnel)
9 ORGANIZATIONAL DESIGNATIONS DDO/LA Division Foreign Field Mexico City, Mexico Station Independent Ops Branch			10 LOCATION OF OFFICIAL STATION Mexico City, Mexico		
11 POSITION TITLE Operations Officer			12 POSITION NUMBER GK76		13 CAREER SERVICE DESIGNATION DOG
14 CLASSIFICATION SCHEDULE (GS, LB, IN.) GS		15 OCCUPATIONAL SERIES 0136.01		16 GRADE AND STEP 13 2	
				17 SALARY OR RATE 26887	
18 REMARKS Reassigned from position FS35 CMS/MSB <i>[Signature]</i> <i>This action reflects WGI- 1/29/78</i>					
18A SIGNATURE OF REQUESTING OFFICIAL J. Halpin			DATE SIGNED 1/27/78		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER CMS <i>[Signature]</i>
			DATE SIGNED 1/29/78		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19 ACTION CODE 37	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC ALPHABETIC 51620 LA	22 STATION CODE 45075	23 INTEGREE CODE	24 HODTIS CODE 3
25 DATE OF BIRTH MO DA YR 08 04 35		26 DATE OF GRADE MO DA YR		27 DATE OF LET MO DA YR	
28 SITE EMPLOY MO DA YR		29 SPECIAL REFERENCE 1-TSC 2-DCSM 3-TILA 4-DCSM		30 RETIREMENT DATA CODE	
31 SEPARATION DATA CODE		32 CORRECTION/CANCELLATION DATA TYPE MO DA YR		33 SECURITY REG. NO.	
34 VET PREFERENCE CODE 0-None 1-5 PT 2-10 PT		35 SERV COMP DATE MO DA YR		36 LONG COMP DATE MO DA YR	
37 CAREER CATEGORY CAR. DES. PROB. TEMP		38 FEDERAL HEALTH INSURANCE CODE CODE CODE 1-MS 2-MS 3-MS/OPF 4-UNEMPLOYED		39 SOCIAL SECURITY NO.	
40 PERIODS (FEDERAL GOVERNMENT SERVICE) CODE 0-00 PREVIOUS SERVICE 1-00 BREAK IN SERVICE 2-00 BREAK IN SERVICE (FIS FROM 3 YEARS) 3-00 BREAK IN SERVICE (FROM 3 YEARS)		41 LEAVE CAT CODE		42 FEDERAL TAX DATA FORM EXEMPTED CODE NO TAX EXEMPTIONS 1-YES 2-NO	
43 STATE TAX DATA FORM EXEMPTED CODE NO TAX EXEMPTIONS 1-YES 2-NO		44 POSITION CONTROL CERTIFICATION 1-27-78 AED		45 OFF APPROVAL Ann E. O. Ksok	
				DATE APPROVED 1-31-78	

FORM 1152 USE PREVIOUS EDITION

SECRET

82. IMPDET CL. BY. 007622

SECRET
(When Filled In)

26 1977

REQUEST FOR PERSONNEL ACTION					DATE PREPARED 21 March 1977		
1. SERIAL NUMBER 036130		2. NAME (Last-First-Middle) FLORES, DANIEL					
3. NATURE OF PERSONNEL ACTION REMOVAL FROM PARTICIPATION IN CIA RETIREMENT SYSTEM				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 04 10 77		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS V TO V <input checked="" type="checkbox"/> V TO CF <input type="checkbox"/> CF TO V <input type="checkbox"/> CF TO CF <input checked="" type="checkbox"/>		7. PAY AND NICA 7135-4534-0000		8. LEGAL AUTHORITY (Completed by Office of Personnel) PL 88-643, Sect. 203			
9. ORGANIZATIONAL DESIGNATIONS DDO/LA				10. LOCATION OF OFFICIAL STATION WASH., D.C.			
11. POSITION TITLE				12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION DQG	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) 45		15. OCCUPATIONAL SERIES		16. GRADE AND STEP 13		17. SALARY OR RATE \$	
18. REMARKS SUBJECT REMOVED FROM SYSTEM IN ACCORDANCE WITH HN 20-763.							
18A. SIGNATURE OF REQUESTING OFFICIAL			DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING NUMERIC ALPHABETIC		22. STATION CODE	23. INTERGEE CODE	24. MOOTHS CODE	25. DATE OF BIRTH MO DA YR 09 10 35
26. RET EXPIRES MO DA YR	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1-YES 2-NO 3-YES 4-NO		31. SEPARATION DATA CODE	32. CORRECTION CANCELLATION DATA TYPE MO DA YR	33. SECURITY REQ NO	
35. VET PREFERENCE CODE 0-NO 1-1 PT 2-10 PT	36. SERV COMP DATE MO DA YR	37. LONG COMP DATE MO DA YR	38. CAREER CATEGORY LAW DIST PROV. TEMP	39. FEGLI HEALTH INSURANCE CODE CODE 0-NO 1-YES 2-YES/OPT 3-UNAVAILABLE	40. SOCIAL SECURITY NO		
41. PERIODS (CIVILIAN GOVERNMENT SERVICE) CODE 0-NO PREVIOUS SERVICE 1-NO DELAY IN SERVICE 2-DELAY IN SERVICE (LESS THAN 3 YEARS) 3-DELAY IN SERVICE (MORE THAN 3 YEARS)		42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE MO TAX EXEMPTIONS 1-YES 2-NO	44. STATE TAX DATA FORM EXECUTED CODE MO TAX EXEMPTIONS 1-YES 2-NO		45. POSITION CONTROL CERTIFICATION 3-24 77	
46. C.F. APPROVAL Firm Vanney				DATE APPROVED 2 Apr 77			

FORM 1152 USE PREVIOUS EDITION

SECRET

IMDET CI BY 007622

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
				15 February 1977	
1 SERIAL NUMBER		2 NAME (Last-First-Middle)			
036130		Flores, Daniel			
3 NATURE OF PERSONNEL ACTION			4 EFFECTIVE DATE REQUESTED		5 CATEGORY OF EMPLOYMENT
Reassignment			MONTH DAY YEAR 02 26 77		Regular
6 FUNDS			7. FAN AND NSCA		8 LEGAL AUTHORITY (Completed by Office of Personnel)
<input type="checkbox"/> V TO V <input type="checkbox"/> CF TO V <input checked="" type="checkbox"/> V TO CF <input type="checkbox"/> CF TO CF			7135-4534 0000		
9 ORGANIZATIONAL DESIGNATIONS			10 LOCATION OF OFFICIAL STATION		
DDO/LA Division Cuba Operations Group EA Area			Washington, D. C.		
11 POSITION TITLE			12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION
Operations Officer			(13) FS35		DQG
14 CLASSIFICATION SCHEDULE (GS, LB, etc.)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP	17 SALARY OR RATE
GS		0136.01		13 1	\$24,308
18. REMARKS					
Reassigned from DDO/LA Position CQ 66					
CMS/MSB <i>SB Valenti</i> 2-17-77					
19A SIGNATURE OF REQUESTING OFFICIAL		DATE SIGNED		19B SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
<i>J. Halpin</i> J. Halpin CLAPERS		15Feb77		<i>Joseph A. Smith</i> CMS/13	
DATE SIGNED					
2-24-77					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING	22 STATION CODE	23 INTEGRITY CODE	24 ROOTS CODE
37	10	NUMERIC ALPHABETIC 51500 LA	75013		
25 DATE OF BIRTH	26 DATE OF GRADE	27 DATE OF LIT	28 DATE OF BIRTH	29 DATE OF GRADE	30 DATE OF LIT
MO DA YR	MO DA YR	MO DA YR	MO DA YR	MO DA YR	MO DA YR
1 03 13					
31 SEPARATION DATA CODE	32 CORRECTION CANCELLATION DATA	EOD DATA			
TYPE	MO DA YR				
35 VET PREFERENCE	36 SERV COMP DATE	37 LONG COMP DATE	38 CAREER CATEGORY	39 HEALTH INSURANCE	40 SOCIAL SECURITY NO
CODE	MO DA YR	MO DA YR	CODE	CODE	
0-0000			EMP/STP	1-WAIVER	
1-10 PT			PROV/TEMP	2-YES	
2-10 PT				3-UNAVAILABLE	
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE	42 LEAVE CAT CODE	43 FEDERAL TAX DATA	44 STATE TAX DATA		
CODE	CODE	CODE	CODE		
0-NO PREVIOUS SERVICE		FORM EXEMPTED	FORM EXEMPTED		
1-NO DEBAR IN SERVICE		1-YES	1-YES		
2-DEBAR IN SERVICE (LESS THAN 3 YEARS)		2-NO	2-NO		
3-DEBAR IN SERVICE (MORE THAN 3 YEARS)					
45 POSITION CONTROL CERTIFICATION				DATE APPROVED	
2-25-77 <i>DSH</i>				2-25-77	
01 MAR 1977					
SECRET				12. UPDST CL BY 007AJ2	

1152 USE PREVIOUS EDITION

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 19 January 1977																																																																																											
1. SERIAL NUMBER 036130 ✓		2. NAME (Last-First-Middle) Flores, Daniel ✓																																																																																													
3. NATURE OF PERSONNEL ACTION PROMOTION			4. EFFECTIVE DATE REQUESTED MONTH 01 DAY 30 YEAR 77		5. CATEGORY OF EMPLOYMENT Regular																																																																																										
6. FUNDS <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 20px; background-color: black; margin-right: 5px;"></div> <div style="display: flex; flex-direction: column; gap: 5px;"> <div>V TO V</div> <div>C TO V</div> </div> <div style="margin-left: 20px; display: flex; flex-direction: column; gap: 5px;"> <div>Y TO C</div> <div>C TO C</div> </div> </div>			7. PAN AND NSCA 7135 4534 0000		8. LEGAL AUTHORITY (Complied by Office of Personnel)																																																																																										
9. ORGANIZATIONAL DESIGNATIONS DDO/LA Division ✓ Cuba Operations Group ✓ WH Area ✓			10. LOCATION OF OFFICIAL STATION Washington, D.C.																																																																																												
11. POSITION TITLE Operations Officer ✓ (13)			12. POSITION NUMBER CQ66		13. CAREER SERVICE DESIGNATION DQG ✓																																																																																										
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01 ✓		16. GRADE AND STEP 13 1																																																																																											
17. SALARY OR RATE \$24,508																																																																																															
18. REMARKS FROM: GS-12/4, \$22,485 <div style="text-align: right; font-size: 1.2em;">for 12/4</div>																																																																																															
18A. SIGNATURE OF REQUESTING OFFICER <i>John Malpin</i> John Malpin, CAPERS			DATE SIGNED 19 Jan 77		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Michael...</i> DATE SIGNED 21 Jan 77																																																																																										
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																																																																																															
<table border="1" style="width:100%; border-collapse: collapse; font-size: 0.7em;"> <tr> <td>19. ACTION CODE 22</td> <td>20. EMPLOY CODE 10</td> <td>21. OFFICE CODE 51500</td> <td>22. STATION CODE LA</td> <td>23. RETIRE CODE 75013</td> <td>24. HONOR CODE 1</td> <td>25. DATE OF BIRTH 08/04/35</td> <td>26. DATE OF GRADE 01/15/77</td> <td>27. DATE OF LST 01/15/77</td> </tr> <tr> <td>28. DATE OF ENTRY NO DA YR</td> <td>29. DATE OF ENTRY NO DA YR</td> <td>30. DATE OF ENTRY NO DA YR</td> <td>31. DATE OF ENTRY NO DA YR</td> <td>32. DATE OF ENTRY NO DA YR</td> <td>33. DATE OF ENTRY NO DA YR</td> <td>34. DATE OF ENTRY NO DA YR</td> <td>35. DATE OF ENTRY NO DA YR</td> <td>36. DATE OF ENTRY NO DA YR</td> </tr> <tr> <td colspan="6">37. DATE OF ENTRY NO DA YR</td> <td colspan="2">38. DATE OF ENTRY NO DA YR</td> <td>39. DATE OF ENTRY NO DA YR</td> </tr> <tr> <td colspan="6">40. DATE OF ENTRY NO DA YR</td> <td colspan="2">41. DATE OF ENTRY NO DA YR</td> <td>42. DATE OF ENTRY NO DA YR</td> </tr> <tr> <td colspan="6">43. DATE OF ENTRY NO DA YR</td> <td colspan="2">44. DATE OF ENTRY NO DA YR</td> <td>45. DATE OF ENTRY NO DA YR</td> </tr> <tr> <td colspan="6">46. DATE OF ENTRY NO DA YR</td> <td colspan="2">47. DATE OF ENTRY NO DA YR</td> <td>48. DATE OF ENTRY NO DA YR</td> </tr> <tr> <td colspan="6">49. DATE OF ENTRY NO DA YR</td> <td colspan="2">50. DATE OF ENTRY NO DA YR</td> <td>51. DATE OF ENTRY NO DA YR</td> </tr> <tr> <td colspan="6">52. DATE OF ENTRY NO DA YR</td> <td colspan="2">53. DATE OF ENTRY NO DA YR</td> <td>54. DATE OF ENTRY NO DA YR</td> </tr> <tr> <td colspan="6">55. DATE OF ENTRY NO DA YR</td> <td colspan="2">56. DATE OF ENTRY NO DA YR</td> <td>57. DATE OF ENTRY NO DA YR</td> </tr> <tr> <td colspan="6">58. DATE OF ENTRY NO DA YR</td> <td colspan="2">59. DATE OF ENTRY NO DA YR</td> <td>60. DATE OF ENTRY NO DA YR</td> </tr> </table>						19. ACTION CODE 22	20. EMPLOY CODE 10	21. OFFICE CODE 51500	22. STATION CODE LA	23. RETIRE CODE 75013	24. HONOR CODE 1	25. DATE OF BIRTH 08/04/35	26. DATE OF GRADE 01/15/77	27. DATE OF LST 01/15/77	28. DATE OF ENTRY NO DA YR	29. DATE OF ENTRY NO DA YR	30. DATE OF ENTRY NO DA YR	31. DATE OF ENTRY NO DA YR	32. DATE OF ENTRY NO DA YR	33. DATE OF ENTRY NO DA YR	34. DATE OF ENTRY NO DA YR	35. DATE OF ENTRY NO DA YR	36. DATE OF ENTRY NO DA YR	37. DATE OF ENTRY NO DA YR						38. DATE OF ENTRY NO DA YR		39. DATE OF ENTRY NO DA YR	40. DATE OF ENTRY NO DA YR						41. DATE OF ENTRY NO DA YR		42. DATE OF ENTRY NO DA YR	43. DATE OF ENTRY NO DA YR						44. DATE OF ENTRY NO DA YR		45. DATE OF ENTRY NO DA YR	46. DATE OF ENTRY NO DA YR						47. DATE OF ENTRY NO DA YR		48. DATE OF ENTRY NO DA YR	49. DATE OF ENTRY NO DA YR						50. DATE OF ENTRY NO DA YR		51. DATE OF ENTRY NO DA YR	52. DATE OF ENTRY NO DA YR						53. DATE OF ENTRY NO DA YR		54. DATE OF ENTRY NO DA YR	55. DATE OF ENTRY NO DA YR						56. DATE OF ENTRY NO DA YR		57. DATE OF ENTRY NO DA YR	58. DATE OF ENTRY NO DA YR						59. DATE OF ENTRY NO DA YR		60. DATE OF ENTRY NO DA YR
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SECRET

SECRET
(When Filled In)

19 NOV 1976

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 10 November 1976	
1. SERIAL NUMBER 036130		2. NAME (Last-First-Middle) Flores, Daniel					
3. NATURE OF PERSONNEL ACTION Reassignment				4. EFFECTIVE DATE REQUESTED MONTH 12 DAY 04 YEAR 76		5. CATEGORY OF EMPLOYMENT Regular	
6. FUNDS		7. V TO V V TO C C TO V X C TO C		8. PAN AND NSCA 7135-4534 0000		9. LEGAL AUTHORITY (Completed by Office of Personnel)	
10. ORGANIZATIONAL DESIGNATIONS DDO/LA Division Cuba Operations Group WH Area				11. LOCATION OF OFFICIAL STATION Washington, D. C.			
12. POSITION TITLE Operations Officer (12)				13. POSITION NUMBER CQ67		14. CAREER SERVICE DESIGNATION DQG	
15. CLASSIFICATION SCHEDULE (GS, LS, etc.) GS		16. OCCUPATIONAL SERIES 0136.01		17. GRADE AND STEP 12 8		18. SALARY OR RATE 55485 \$21,804	
19. REMARKS Reassigned from DDA/OTR Position BD 33 Concur: <u>Hugh McClafferty 10 Nov 76 (telecord)</u> <u>OTR/PERS</u> CMS/MSB <u>Il Valent, CMS/MSB 11-16-76</u>							
20. SIGNATURE OF REQUESTING OFFICIAL <i>John F. Halpin</i> John F. Halpin C/LA/PERS				21. DATE SIGNED 10 Nov 76		22. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Gregory D. Aul</i> Gregory D. Aul	
23. DATE SIGNED 11/15/76		24. SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
25. ACTION CODE 37		26. EMPLOY CODE 10		27. OFFICE CODE 51500 LA		28. STATION CODE 75013	
29. DATE OF BIRTH 12/24/35		30. DATE OF SERVICE 12/24/35		31. DATE OF LEAVE 12/24/35		32. DATE OF LEAVE 12/24/35	
33. DATE OF LEAVE 12/24/35		34. DATE OF LEAVE 12/24/35		35. DATE OF LEAVE 12/24/35		36. DATE OF LEAVE 12/24/35	
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45. DATE OF LEAVE 12/24/35		46. DATE OF LEAVE 12/24/35		47. DATE OF LEAVE 12/24/35		48. DATE OF LEAVE 12/24/35	
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73. DATE OF LEAVE 12/24/35		74. DATE OF LEAVE 12/24/35		75. DATE OF LEAVE 12/24/35		76. DATE OF LEAVE 12/24/35	
77. DATE OF LEAVE 12/24/35		78. DATE OF LEAVE 12/24/35		79. DATE OF LEAVE 12/24/35		80. DATE OF LEAVE 12/24/35	
81. DATE OF LEAVE 12/24/35		82. DATE OF LEAVE 12/24/35		83. DATE OF LEAVE 12/24/35		84. DATE OF LEAVE 12/24/35	
85. DATE OF LEAVE 12/24/35		86. DATE OF LEAVE 12/24/35		87. DATE OF LEAVE 12/24/35		88. DATE OF LEAVE 12/24/35	
89. DATE OF LEAVE 12/24/35		90. DATE OF LEAVE 12/24/35		91. DATE OF LEAVE 12/24/35		92. DATE OF LEAVE 12/24/35	
93. DATE OF LEAVE 12/24/35		94. DATE OF LEAVE 12/24/35		95. DATE OF LEAVE 12/24/35		96. DATE OF LEAVE 12/24/35	
97. DATE OF LEAVE 12/24/35		98. DATE OF LEAVE 12/24/35		99. DATE OF LEAVE 12/24/35		100. DATE OF LEAVE 12/24/35	

SECRET

1. REPORT CL 31 CQ7421

S E C R E T
EYES ONLY

20 OCT 1976

MEMORANDUM FOR: Chairman, GS-12 Evaluation Board

FROM : Raymond A. Warren
Chief, Latin America Division

SUBJECT : Recommendation for Promotion to
Grade GS-13, Daniel Flores

1. Mr. Daniel Flores was recently assigned to OTR as an operations instructor to capitalize on his fine operational record which he developed during his two field assignments in Guayaquil, Ecuador, and in Lima, Peru, and his most recent operational assignment with LA/COG. His overall performance has clearly been characterized by exceptional proficiency and he has been rated by his most recent supervisor as "outstanding" for his handling of a sensitive on-island case and his development and pursuit of Cuban operational leads. Mr. Flores has definite growth potential and clearly meets or exceeds the criteria for promotion to Grade GS-13, a promotion which is most strongly recommended.

2. During the past year Mr. Flores was responsible for handling a very sensitive and well placed on-island Cuban asset. This asset is probably one of the "messiest and disorganized individuals" with whom a case officer in this Agency has had to contend. However, Mr. Flores clearly demonstrated his fine handling abilities in his manipulation and exploitation of this agent. As a result of his guidance and his ability to effectively debrief this person, Mr. Flores was able to make this asset one of our most productive on-island sources. During the last year this source produced SI reports on subject matter which often commanded attention at the highest levels of our government.

3. Mr. Flores has shown a remarkable growth potential during the last year. He is determined, persistent, serious, and commendably aggressive. He is mature, self-assured, and his operational decisions are sound. His managerial skills are in keeping with his operational potential. He was often called

S E C R E T
EYES ONLY

E2 IMPDET
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EYES ONLY

upon in the last twelve months to act as Chief of his section, a GS-14 position. He demonstrated sound leadership qualities by stimulating interest and enthusiasm in his staff. His operational programs were aggressive and imaginative. Mr. Flores' supervisory talents combined with his excellent professional skills portend a continuing and successful career in this Agency.

4. While assigned to LA/COG, Mr. Flores was involved in the spotting, assessing, developing access to, and eventually pitching a Cuban who was the head of Cubana Airlines in a Latin American country. The recruitment pitch was not successful but the details of this operation were handled in the most professional manner. Mr. Flores developed more leads to relatives and friends of Cuban officials during this period than any other LA/COG operations officer. He has native fluency in Spanish and feels "at home" operating in the field. While in LA/COG Mr. Flores was called upon to do a considerable amount of TDY travel since he was on call to meet his on-island asset anytime, any place whenever the agent traveled out of Cuba. In addition to these travels, Mr. Flores did a lot of traveling seeking out and debriefing potential access agents. During this last year he clearly demonstrated his ability to function independently and to assume responsibilities usually reserved for officers much more senior in grade and experience.

5. Mr. Flores was assigned in July 1976 to OTR on a two-year rotational assignment as an operations instructor. Upon completion of this assignment, Mr. Flores will return to this Division to assume responsibilities, either at Headquarters or in the field, commensurate with his demonstrated operational and managerial talents. In recognition of Mr. Flores' outstanding agent handling skills, his overall professional competency, and his obvious growth potential, it is strongly recommended that Mr. Flores be promoted to Grade GS-13.


Raymond A. Warren

SECRET
EYES ONLY

SECRET

21 September 1976

MEMORANDUM FOR: Chief, OTR/LTD

FROM : Walter R. Cox
Chief, ALT Unit

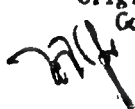
SUBJECT : Completion of Training Report
Trainee: Daniel Flores
Training Program: MURAD

1. For your information and for documentation in Daniel Flores' official personnel file, this memorandum certifies that he received the five-day SAI Persuasion Skills course at an NOCB safesite in Arlington, Virginia, between 11 and 17 August 1976. The instructor was Mr. George Steitz.

2. Briefly, the SAI course is a program in human relations and communications effectiveness on the interpersonal level. It provides the trainee with a framework for analyzing problems usually encountered in supervisory or in agent development, recruitment, and handling situations and with a system for presenting his ideas in a way standing the best chance for success in gaining a target individual's willing acceptance. Flores was an active and most interested participant throughout the program and achieved a good understanding of the basic principles involved. A copy of his course critique is attached for your information.

3. Since Flores is an ALT Instructor, we plan to dispense with the formality of a post-training questionnaire.


Walter R. Cox


Originated by:
George W. Steitz

E-2 Impdet.
Classified by 024097.

SECRET

CTR/ALT
Staff

Trainee: Mr. Daniel Flores
Instructor: Mr. Steitz

August 1976 -

To assist us in making decisions about future SAI training or application, your answers to the following questions will be most appreciated.

1. Do you feel SAI training was helpful to you? (If you choose to do so, please explain why or how.) This course was extremely useful to me. One of the main features of the course -- how to perceive the other person's objectives before your own -- was of particular interest because, as an instructor it will be one of the main tools I will use in evaluating the level of understanding of each trainee. This experience will also be very helpful to me in my career as a case officer. I can think of several instances where SAI could have helped me turn several failures (recruitment pitches) into successes.

2. Did SAI training provide you with any concepts or tools which can be applied in a practical way to your work problems? To your personal life? Any examples you care to mention?

The benefits that this course will provide for me in my job as an instructor are clear. I am absolutely certain that putting the SAI concept into practice will bring forth not only self satisfaction but career benefits as well. This will also be very helpful to me in my personal life. I can see now that some of the concepts will be put to work immediately.

3. What elements, segments, or aspects of the SAI training were of the most interest or use to you?

The greatest revelation from an operational point of view, was the clarification of perhaps an erroneous idea we have about obtaining our intelligence objectives. I always operated under the belief that the most important thing in my work was to attain my objectives, i.e. the recruitment of an agent. SAI revealed that this is true but it also revealed that it is more important to first consider the target's (agent's) objectives. Once we do this our chances (in my opinion after taking SAI) success would probably increase by at least 90 per cent. If I were to stress one point it would be that more emphasis be placed on dealing with the target's rather than the CO's objectives.

4. Would you recommend SAI training for other of our personnel?

I am sure that many people would be recommended for this training and that all would benefit from it. However, I would strongly recommend that personnel officers be given SAI as a prerequisite to their job. It would certainly help them in dealing with large numbers of different people.

5. What other components or categories of personnel do you believe would benefit from SAI training to a degree making it worthwhile for them to receive it?

6. Please comment, if you have any definite opinion, on the duration and pace of the training: too long/short? too fast/slow? The pace of the course was excellent. However, adding one or two more days would certainly help in putting the SAI concepts into practice by the trainee himself. That is, perhaps a live exercise with a person who is not aware of the training situation. A trainee could be tasked to elicit information from an unwitting participant. The use of videotapes and/or movies would help in testing the trainees perceptiveness through the course.

7. Any other comments you may wish to make:

A brief comment about the instructor. He was definitely responsible for the success of the course. Mr. Steitz showed excellent knowledge of the SAI material and throughout the course kept the student's interest alive x by showing tremendous enthusiasm in what he was teaching. The end result of the professionalism that Mr. Steitz demonstrated in the class is reflected in the comments stated here and in the confidence he instilled in me personally.

8. On a scale of 1 to 5, how would you rate SAI training in relation to other training you have received from the Agency? Please encircle applicable number:

Non-Essential	Slightly Helpful	Generally Helpful	Very Helpful	Essential
1	2	3	4	5
				X

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
				25 June 1976	
1. SERIAL NUMBER		2. NAME (Last-First-Middle)			
036130		FLORES, Daniel			
3. NATURE OF PERSONNEL ACTION			4. EFFECTIVE DATE REQUESTED		5. CATEGORY OF EMPLOYMENT
Reassignment			MONTH DAY YEAR 06 21 76		Regular
6. FUNDS		7. PAY AND RATE		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
<input type="checkbox"/> V TO V <input type="checkbox"/> CF TO V <input checked="" type="checkbox"/> V TO CF <input type="checkbox"/> CF TO CF		175-3010 0000			
9. ORGANIZATIONAL DESIGNATIONS			10. LOCATION OF OFFICIAL STATION		
DDA/OTR Functional Training Division Operations Training Branch			Washington, D.C.		
11. POSITION TITLE			12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION
Instructor-Ops			BD33		DQB
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)		15. OCCUPATIONAL SERIES		17. SALARY OR RATE	
GS		1712.32		20678	
16. REMARKS					
CONCUR: <i>[Signature]</i> LA/PERS 20678206 Acknowledgment of Cataloging Etc. will be provided payroll security CONCUR: <i>[Signature]</i> DDO/MSB/MPC					
18A. SIGNATURE OF REQUESTING OFFICIAL		DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
Harry E. Fitzwater, DTR		25 June 76		DDO/CMG/12	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODES	22. STATION CODE	23. EMPLOYEE CODE	24. ADDRESS CODE
37	10	17500	CTR	75013	
25. NTE EXPERT	26. SPECIAL DISTRICT	27. DETACHMENT DATA	28. SEPARATION DATA CODE	29. FUNDATION CANCELLATION DATA	30. DATA
31. VET PREFERENCE	32. VET COMP DATA	33. LONG COMP DATA	34. CAREER CATEGORY	35. HEALTH STATUS	36. SECURITY DATA
37. PERSONAL (EXCLUDED GOVERNMENT SERVICE)	38. LEAVE (LT)	39. PERSONAL DATA	40. PERSONAL DATA	41. PERSONAL DATA	42. PERSONAL DATA
43. REMARKS (EXCLUDED COPIES)					
From 09 June 1976 <i>[Signature]</i>					

SECRET

14-00000

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(If Applicable)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED	
										26 AUGUST 1975	
1. SERIAL NUMBER 036130 ✓		2. NAME (Last-First-Middle) FLORES, DANIEL ✓									
3. NATURE OF PERSONNEL ACTION CONVERSION FROM FSR STATUS						4. EFFECTIVE DATE (Requested) MONTH DAY YEAR 09 14 75		5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS ▶		V TO V		V TO O		7. PAY AND NYCA 6135-4534-0000		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS DDO/LATIN-AMERICA DIVISION CUBA OPERATIONS GROUP OPS BRANCH						10. LOCATION OF OFFICIAL STATION WASHINGTON, D.C.					
11. POSITION TITLE OPERATIONS OFFICER ✓ (14)						12. POSITION NUMBER CQ65 ✓		13. CAREER SERVICE DESIGNATION DQB. ✓			
14. CLASSIFICATION SCHEDULE (GS, LS, etc.) GS				15. OCCUPATIONAL SERIES 0136.01 ✓		16. GRADE AND STEP 12 2 ✓		17. SALARY OR RATE \$ 19,078 ✓			
18. REMARKS											
18A. SIGNATURE OF REQUESTING OFFICIAL H.L. BERTHOLD, C/LA/PERS											
DATE SIGNED 26 AUG 75				18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER				DATE SIGNED			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE (CODE)	22. STATION CODE	23. INITIALS CODE	24. MONTH CODE	25. DATE OF BIRTH MO DA YR	26. DATE OF GRADE MO DA YR	27. DATE OF LST MO DA YR			
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28. DTI (CODE)	29. PAYING OFFICER	30. PAYMENT DATE	31. PAYMENT DATE	32. PAYMENT DATE	33. PAYMENT DATE	34. PAYMENT DATE	35. PAYMENT DATE	36. PAYMENT DATE	37. PAYMENT DATE	38. PAYMENT DATE	39. PAYMENT DATE
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(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

10 SEPTEMBER 1974

1. SERIAL NUMBER 036130		2. NAME (Last-First-Middle) FLORES, DANIEL																			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT		4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 09 15 74																			
5. CATEGORY OF EMPLOYMENT REGULAR		6. LEGAL AUTHORITY (Completed by Office of Personnel)																			
7. PAN AND NSCA 5135 4534 0000		8. LEGAL AUTHORITY (Completed by Office of Personnel)																			
9. ORGANIZATIONAL DESIGNATIONS DDO/WH DIVISION WH/COG OPS BRANCH		10. LOCATION OF OFFICIAL STATION WASH D.C.																			
11. POSITION TITLE POL OFF ATTACHE OPS OFFICER		12. POSITION NUMBER 1159																			
13. CAREER SERVICE DESIGNATION DQB		14. CLASSIFICATION SCHEDULE (G.S., L.R., etc.) FSR GS																			
15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 06 1 12 1																			
17. SALARY OR RATE 13,863 17,497		18. REMARKS From position 1134 Wash, D.C.																			
19. SIGNATURE OF REQUESTING OFFICIAL H.E. BRINTHOLD D/WH/PERS		20. DATE SIGNED 12 SEP 74																			
21. SIGNATURE OF APPROVING OFFICER Ruben		22. DATE SIGNED 16 Sep 74																			
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23. ACTION 1000	24. EMPLOY 1000	25. OFFICE CODE 5135001	26. STATION 1000	27. OFFICE 1000	28. MONTHS 1	29. DATE OF REQ. 08-04-73	30. DATE OF GRANT 10-04-73	31. DATE OF LST 10-04-73													
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11 SEP 74

FOR PERSONNEL ACTION

SECRET

11 SEP 74

11 SEP 74


(B) Are killed by

DATE PREPARED

1 SERIAL NUMBER	2 NAME (Last-First-Middle)
036130	Flores, Daniel

4 EFFECTIVE DATE REQUESTED

MONTH	DAY	YEAR
07	22	77

6 FUNDS		V TO V	V TO CF
		CF TO V	X CF TO CF

7. PAN AND NSCA
5
0135-4534 | 0000

B ISOAL AUTHORITY (Completed by Office of Personnel)

10. LOCATION OF OFFICIAL STATION

Washington, D.C.

1134

13 CAREER SERVICE DESIGNATION

DQB

14. CLASSIFICATION SCHEDULE (G.S., 2 R. 106.)
FSR
GS

13 OCCUPATIONAL SERIES
0136.01

16 GRADE AND STEP	
06	1
12	1

17 SALARY OR RATE 13.863 ✓
17.497 ✓

THE JOURNAL OF THE

From Lima, Peru

57085

* Lima, Peru

18A. SIGNATURE OF REQUESTING OFFICIAL
H. L. Berthold, C/WH/PERS

DATE SIGNED _____

11 July 78

18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER

DATE MOND

2/18/20

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 37 10	20 EMPLOY CODE 51500	21 OFFICE COUNTRY NUMERIC 204	22 STATION CODE ALPHABETIC TSCB	23 UTILITY CODE 3	24 POSTER CODE 1	25 DATE OF BIRTH MO DA YR 08 04 1955	26 DATE OF GRADE MO DA YR	27 DATE OF LST MO DA YR	
28 SITE EXPLOS MO DA YR	29 SPECIAL BRANCHES	30 GERMANY DATA 1-10 1-10 1-10	31 SEPARATION DATA CODE	32 COLLECTION/CLASSIFICATION DATA TYPE MO DA YR	IOD DATA →			33 WEIGHING REQ REQ	34 LST
35 HQ PERSONNEL CODE 0 0000 1-1 PM 2-10 PM	36 SERV COMP DATA MO DA YR MO DA YR	37 LOAN COMP DATA MO DA YR MO DA YR	38 LABORS (ARTISAN) LAB TYPE REQ-TYPE	39 FINAL-ANALYST OPERABLE CODE 0 0000 1-10 PM 2-10 PM				40 SOCIAL SECURITY NO	
41 PERSONNEL CLASSIFICATION CODE 0-00 PERSONNEL SERVICE 1-01 CIVILIAN 2-02A 2-02B 2-02C 2-02D 2-02E 3-03A 3-03B 3-03C 3-03D 3-03E	42 LEADS LST CODE 0-00 1-01 2-02	43 LEADS LST CODE 0-00 1-01 2-02	44 RECORD LST DATA CODE 0-00 1-01 2-02	45 FORM REC'D CODE 0-00 1-01 2-02	46 STATE LST DATA CODE 0-00 1-01 2-02	47 FORM REC'D CODE 0-00 1-01 2-02	48 FORM REC'D CODE 0-00 1-01 2-02	49 FORM REC'D CODE 0-00 1-01 2-02	
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SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED	
										18 June 1974	
1. SERIAL NUMBER		2. NAME (Last-First-Middle)									
036130		FLORES DANIEL									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE REQUESTED			5. CATEGORY OF EMPLOYMENT				
DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM				MONTH DAY YEAR 06 23 74			REGULAR				
6. FUNDS		V TO V		V TO O		7. PAY AND BENEFIT		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
CF TO V		X		O TO O		4135708Y 0000		PL 88-643 SECT. 203			
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDO/WH <i>Division</i>						LIMA, Peru					
11. POSITION TITLE						12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION			
								D			
14. CLASSIFICATION SCHEDULE (GS, FS, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
						12		s			
18. REMARKS											
EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.											
19A. SIGNATURE OF REQUESTING OFFICIAL				DATE SIGNED		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER				DATE SIGNED	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. OFFICIAL CODE		24. MONTHLY CODE	
				NUMERIC ALPHABETIC						3 080935	
25. SITE EXPENSE		26. SPECIAL REFERENCE		27. RETIREMENT DATA		28. SEPARATION DATA (CODE)		29. CANCELLATION CANCELLATION DATA		30. SECURITY REQ NO	
				CODE		2				EOD DATA	
31. SET PRESENTS		32. SET COMP DATE		33. SET COMP DATE		34. SET COMP DATE		35. SET COMP DATE		36. SOCIAL SECURITY NO	
CODE		CODE		CODE		CODE		CODE		CODE	
37. PERIODIC (LIFE) AND GOVERNMENT WORK		38. LEAVE (CODE)		39. LEAVE (CODE)		40. LEAVE (CODE)		41. LEAVE (CODE)		42. LEAVE (CODE)	
CODE		CODE		CODE		CODE		CODE		CODE	
43. REMARKS (Continuation of Remarks)											
See memo signed by <i>6/2/74</i>											

1152 USE PREVIOUS EDITIONS
OF (1-71)

SECRET

12 IMPDET CL BY 007022

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

19 NOVEMBER 1973

1. SERIAL NUMBER 2. NAME (Last-First-Middle)

036130

FLORES DANIEL

3. NATURE OF PERSONNEL ACTION

PROMOTION

4. EFFECTIVE DATE REQUESTED

MONTH DAY YEAR
11 25 73

5. CATEGORY OF EMPLOYMENT

REGULAR

6. FUNDS

V TO V

V TO C

C TO V

C TO C

7. FAN AND NSCA

4135 1084 0000

8. LEGAL AUTHORITY (Completed by Office of Personnel)

9. ORGANIZATIONAL DESIGNATIONS

DDO/WII DIVISION
FOREIGN FIELD
BR 3 - LIMA, PERU STATION

10. LOCATION OF OFFICIAL STATION

LIMA, PERU

11. POSITION TITLE

POL OFFICER ATTACHE
OPS OFFICER

(12)

12. POSITION NUMBER

0136

13. CAREER SERVICE DESIGNATION

D

14. CLASSIFICATION SCHEDULE (GS, FS, etc.)

FSR
GS

15. OCCUPATIONAL SERIES

0136.01

16. GRADE AND STEP

06 1
12 1

17. SALARY OR RATE

13863
17497

18. REMARKS

From: GS-11.4

HOME BASE: WII

* Lima, Peru

James V. Blanford
11/26/73

18A. SIGNATURE OF REQUESTING OFFICIAL

Jane Wurz, AC/WII/Pers

DATE SIGNED

19 Nov 73

18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER

DATE SIGNED

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE	23. INTEGRAL CODE	24. MONTHS CODE	25. DATE OF BIRTH	26. DATE OF GRAD	27. DATE OF LST
22	10	NUMERIC ALPHABETIC 01160 WII	0136	5	3	03/07/35	11/25/73	11/25/73
28. WTE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA	33. SECURITY REG NO.	34. SEX	EOD DATA	
MO. DA. YR.								
35. WTE PREFERENCE	36. SERV COMP. DATE	37. LONG COMP. DATE	38. CAREER CATEGORY	39. HEALTH/HEALTH INSURANCE	40. SOCIAL SECURITY NO.			
CODE	MO. DA. YR.	MO. DA. YR.	CODE	CODE				
1-3 PT 2-16 PT			EMB/BSY PROV/TEMP	CODE	CODE			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE	42. LEAVE CAT.	43. FEDERAL TAX DATA	44. STATE TAX DATA					
CODE	CODE	CODE	CODE					
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45. POSITION CONTROL CERTIFICATION				46. OFF APPROVAL		DATE APPROVED		
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FORM 1152

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(When Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED 23 Nov 71	
1. SERIAL NUMBER 036130		2. NAME (Last-First-Middle) FLORES, DANIEL									
3. NATURE OF PERSONNEL ACTION PROMOTION					4. EFFECTIVE DATE REQUESTED MONTH 11 DAY 28 YEAR 71			5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS V TO V C TO V		V TO C C TO C		7. FINANCIAL ANALYSIS NO CHARGEABLE 2135 1084			8. LEGAL AUTHORITY (Completed by Office of Personnel)				
9. ORGANIZATIONAL DESIGNATIONS DDP/WH Division FOREIGN FIELD BRANCH 3 - LIMA, PERU STATION					10. LOCATION OF OFFICIAL STATION LIMA, PERU						
11. POSITION TITLE POLITICAL OFFICER ATTACHE OPS OFFICER (12)					12. POSITION NUMBER 0136		13. CAREER SERVICE DESIGNATION D				
14. CLASSIFICATION SCHEDULE (GS, I.D., etc.) FSR GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 07 1 11 3		17. SALARY OR RATE 10,014 \$ 13,457					
18. REMARKS From GS 10. 3 *LIMA, PERU.											
18A. SIGNATURE OF REQUESTING OFFICIAL <i>[Signature]</i>				DATE SIGNED 23 Nov 71		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>				DATE SIGNED 11/24/71	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE 22	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC 51760 ALPHABETIC WH		22. STATION CODE 57035	23. INTEGRER CODE 5	24. ROOMS CODE 3	25. DATE OF BIRTH MO. DA. YR. 08/04/35	26. DATE OF GRADE MO. DA. YR. 11/25/71	27. DATE OF LEI MO. DA. YR. 11/25/71		
28. WTE EXPIRY MO. DA. YR.		29. SPECIAL REFERENCE 1-CC 2-ORCA 3-FICA 4-OTHER	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO. DA. YR.		33. SECURITY REG. NO		34. SEX		
35. WTE PREFERENCE CODE 0-NONE 1-5 YR 2-10 YR		36. SERV COMP DATE MO. DA. YR.	37. LONG COMP DATE MO. DA. YR.	38. CAREER CATEGORY CODE	39. LEGAL/HEALTH INSURANCE CODE 0-WAIVER 1-RIG 2-REG/OPY 3-UNRELIABLE		40. SOCIAL SECURITY NO				
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NONE 1-NO PREVIOUS SERVICE 2-SOME IN SERVICE (LESS THAN 3 YEARS) 3-SOME IN SERVICE (MORE THAN 3 YEARS)				42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS		44. STATE TAX DATA FORM EXECUTED CODE NO TAX STATE CODE				
45. POSITION CONTROL CERTIFICATION 11-26-71					46. O P APPROVAL <i>[Signature]</i>			DATE APPROVED 11/24/71			

FORM 1152 USE PREVIOUS EDITION

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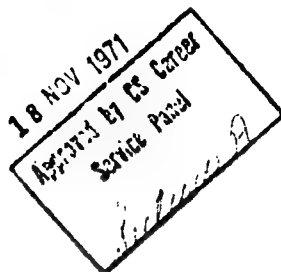
GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

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REPORT OF SERVICE ABROAD												
<div style="float: right; border: 1px solid black; padding: 5px; text-align: center;"> FILE PUNCHED BY </div> TO: Office of Personnel, Transactions and Records Branch, Status Section												
SERIAL NO.		NAME										
		LAST		FIRST				MIDDLE				
1-6		(Print)		7-26								
036130		FLORES		DANIEL								
INSTRUCTIONS												
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (<i>One only</i>). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 99, REVISED.												
PCS DATES OF SERVICE												
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR				CODE			CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION			37	38	39	40-42
09	24	71							1			570
TDY DATES OF SERVICE												
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		AREAS	
MONTH	DAY	YEAR	MONTH	DAY	YEAR				CODE			CODE
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION			37	38	39	40-42
OFFICE OF PERSONNEL USE ONLY - PUNCH AREA												
SOURCE DOCUMENT AND CERTIFICATION												
TRAVEL VOUCHER						DISPATCH						
✓ CABLE						DUTY STATUS OR TIME AND ATTENDANCE REPORT						
OTHER (Specify)												
DOCUMENT IDENTIFICATION NO.						DOCUMENT DATE/PERIOD						
178740						9/10/71						
REMARKS												
PREPARED BY		REPORT ANNOTATED ON CONTROL DOCUMENT		ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED								
DCO		DATE		SIGNATURE								
C & L DIVISION CYBR.		9/14/71		R. B. Brindley								
C & T DIVISION												
THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER												

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EYES ONLY



17 AUG 1971

MEMORANDUM FOR: Secretary, CSCS Panel A

SUBJECT : Recommendation for Promotion to Grade
GS-11, Daniel Flores

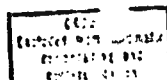
1. It is recommended that Mr. Daniel Flores be promoted from GS-10 to GS-11.

2. Mr. Flores is 36 years old and joined the Agency in March 1962. He has successively been a file clerk, translator, intelligence assistant, career trainee and operations officer. He worked part time for several years so that he could obtain his BA degree from American University. This he did in 1967 with his specialty being Latin American Affairs.

3. Mr. Flores, who is bilingual in English and Spanish, has just completed his first overseas tour as an operations officer in Guayaquil, Ecuador. It is on the basis of his very fine performance during this tour that this promotion request is based. Also as a result of his record in Guayaquil, he has been assigned to Lima Station as an operations officer in a position which is rated as GS-13.

4. The Chief of Base, Guayaquil, and the Chief of Station, Quito, both have rated Mr. Flores as "Strong" in his fitness reports and both have stated that his performance in Guayaquil merited a Quality Step Increase. This QSI request is currently being processed and is based on the outstanding job Mr. Flores did in connection with a very sensitive technical operation. He planned the pre-installation aspects, supervised the installation, located the listening post, recruited the transcriber/secretary and processed all the intelligence which was produced. The intelligence derived from this source has been of consistently high quality and the operation has been described by the Chief of Station, Quito, as the best and most productive of all the operations in Ecuador. Throughout all aspects of the operation, Mr. Flores maintained tight control on its security and avoided any problems in this respect.

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5. By his performance in Guayaquil, Mr. Flores has demonstrated that he has found his proper role as an operations officer and that he has potential for growth in this area of endeavor. WII Division strongly recommends that he be promoted to GS-11.

James E. Shapley
William V. Proctor
Chief
Western Hemisphere Division

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EYES ONLY

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(When Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED 7 September 1971	
1. SERIAL NUMBER 036130		2. NAME (Last-First-Middle) FLORES DANIEL									
3. NATURE OF PERSONNEL ACTION REASSIGNMENT						4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 09 / 14 / 71			5. CATEGORY OF EMPLOYMENT REGULAR		
6. FUNDS V TO V OF TO V		V TO V OF TO V		V TO V OF TO V		7. FINANCIAL ANALYSIS NO CHARGEABLE 2135 1084			8. LEGAL AUTHORITY (Completed by Office of Personnel)		
9. ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 3 LIMA, PERU STATION						10. LOCATION OF OFFICIAL STATION LIMA, PERU					
11. POSITION TITLE Political Officer Attache OPS OFFICER						12. POSITION NUMBER 0136			13. CAREER SERVICE DESIGNATION D		
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) F32 GS			15. OCCUPATIONAL SERIES 0136.01			16. GRADE AND STEP 07 1 10 3			17. SALARY OR RATE 10014 \$ 12285		
18. REMARKS (G. Gonzalez, Ecuador) From DDP/WH #0376 Vice Donald Venute Approved 259a attached. From 259a: Mr. Flores' Spanish capabilities are native reading and high speaking which more than meet the language requirements of intermediate reading and speaking for the Station.											
19A. SIGNATURE OF REQUESTING OFFICIAL Henry L. Berthold, C/WH/Pers				DATE SIGNED 9/13/71		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER [Signature]				DATE SIGNED 11/1/71	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE 37 10		20. EMPLOY CODE 51 100		21. OFFICE CODING NUMERIC ALPHABETIC 51 100 6.2		22. STATION CODE 5705		23. INTEGRAL CODE 5		24. HOUSTON CODE 3	
25. DATE OF BIRTH MO DA. YR. 08/04/35		26. DATE OF GRADE MO DA. YR.		27. DATE OF LET MO DA. YR.		28. DATE OF BIRTH MO DA. YR. 08/04/35		29. DATE OF GRADE MO DA. YR.		30. DATE OF LET MO DA. YR.	
31. SPECIAL REFERENCE 1-CR 2-ORIG 3-FIL 4-NOI		32. RETIREMENT DATA CODE		33. SEPARATION DATA CODE		34. CORRECTION, CANCELLATION DATA TYPE MO DA YR.		35. SECURITY REQ. NO		36. SEC	
37. VET PREFERENCE CODE 0-None 1-1 PT 2-10 PT		38. SERV COMP DATE MO DA. YR.		39. LONG COMP DATE MO DA. YR.		40. CAREER CATEGORY CODE 1-101 2-102		41. FICA HEALTH INSURANCE CODE 1-101 2-102 3-103 4-104		42. SOCIAL SECURITY NO	
43. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)				44. LEAVE CAT CODE		45. FEDERAL TAX DATA FORM PREPARED CODE 1-101 2-102		46. TAX EXEMPTIONS FORM PREPARED CODE 1-101 2-102		47. STATE TAX DATA CODE 1-101 2-102	
48. POSITION CONTROL CERTIFICATION						49. OP APPROVAL [Signature]			50. DATE APPROVED [Date]		

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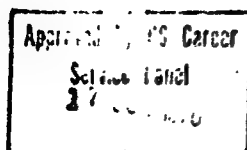
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1112 USE PREVIOUS EDITIONS

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SECRET
EYES ONLY



2 JUN 1970

MEMORANDUM FOR: Secretary, CSCS Panel (Section C)

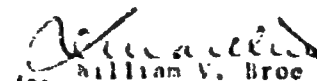
SUBJECT : Recommendation for Promotion to Grade
GS-10, Daniel Flores

1. It is recommended that Mr. Daniel Flores be promoted from GS-9 to GS-10. Mr. Flores has been in his present grade since April 1969.

2. Mr. Flores joined the Agency in 1962. Initially he was employed on a part-time basis in the MI Division while attending American University. He received his AB degree in 1967 and became a full-time staff employee. On the strong recommendation of his supervisors, Mr. Flores was accepted for the Career Training Program which he completed in August 1968. After rejoining the MI Division, he was selected for assignment as an operations officer at the Guayaquil Base, where he arrived in May 1969.

3. Mr. Flores has made a most impressive beginning in Guayaquil. He has adapted to new tasks and a new environment with a mature assurance and a professional approach. Shortly after arrival in Guayaquil the Base was temporarily depleted of other officers. Mr. Flores carried out the duties of acting Chief of Base in a most commendable manner. His fluency in Spanish and his Latin background have been definite assets in the performance of his duties. His performance to date has demonstrated that he handles his agents securely and productively. Both Mr. Flores and his wife have been well accepted within the local community and they carry out their representational duties very effectively.

4. Mr. Flores has proven to be a competent operations officer. As he further develops through experience and responsibility he should become eligible for rapid advancement. In any case he is already performing at a level higher than his present grade and a promotion at this time is strongly recommended.


William V. Broe
Chief
Western Hemisphere Division

SECRET
EYES ONLY

DISPATCH		CLASSIFICATION RYBAT SECRET		FIG. 17	
TO: Chief, WI Division		Z		ACTION REQUIRED	
FROM: Chief of Station, Quito				ACTION REQUIRED	
SUBJECT: Chief of Base, Guayaquil				ACTION REQUIRED	
ADMINISTRATIVE/PERSONNEL - Promotion for <i>Flores</i>					
ACTION REQUIRED: See Below					
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> Approved by CS Career Service Panel 17 JUL 1970 </div> <i>JWEL Flores</i>					
<p>During the visit of the Chief, WID to the Base last November 1969 he mentioned to the COS, Quito and the COB that the promotion for <i>Flores</i> (from GS-9 to GS-10) would be forthcoming; he also said this to <i>Flores</i> during a private meeting. Thus far, however, there has been no notice of the promotion action. The COB assumes that the delay is related in some way to the dates set for meeting of the promotion panel for <i>Flores</i> grade. If this assumption is not correct, however, and some further action by the Base is necessary in addition to the recommendation contained in <i>Flores</i> last Fitness Report, the COB would appreciate being advised.</p>					
<p>Distribution: 1 - Orig. & 2 - C/WID 2 - COS, Quito</p> <p style="text-align: right;"><i>/s/ Robert L. Fambriani</i></p>					
DISPATCH SYMBOL AND NUMBER		DATE			
HNSP-1474		26 May 1970			
CLASSIFICATION		POSTAL SYMBOL			
RYBAT SECRET					

SECRET
(U.S. Gov. Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER 036130				2. NAME (Last-First-Middle) FLORES, DANIEL	
3. NATURE OF PERSONNEL ACTION INTEGRATION - DEPARTMENT OF STATE			4. EFFECTIVE DATE REQUESTED MONTH 04 DAY 10 YEAR 69		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS V TO V CF TO V X CF TO CF			7. FINANCIAL ANALYSIS NO. CHARGEABLE 9135 0884		8. LEGAL AUTHORITY (Completed by Office of Personnel)
9. ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 3 QUITO, ECUADOR STATION Guayaquil, Ecuador Base			10. LOCATION OF OFFICIAL STATION GUAYQUIL, ECUADOR 6488		
11. POSITION TITLE POL OFFICER OPS OFFICER			12. POSITION NUMBER 0376		13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, E.R., etc.) FSR GS		15. OCCUPATIONAL SERIES 0138.01		16. GRADE AND STEP 07 1 09 2	
17. SALARY OR RATE 8153 \$ 8744					
18. REMARKS X ALL SICK AND ALL HOURS ANNUAL LEAVE TO BE TRANSFERRED TO THE DEPARTMENT OF STATE X MARITAL STATUS: MARRIED					
19A. SIGNATURE OF REQUESTING OFFICIAL J. CARSON COVER OFFICER, X5013		DATE SIGNED		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
DATE SIGNED					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19 ACTION CODE 55	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC 5170 ALPHABETIC 10H	22 STATION CODE 19559	23 INTEGRIS CODE 3	24 HOURS CODE 08K4B5
25 DATE OF BIRTH MO. DA. YR. 08 04 65	26 DATE OF GRADE MO. DA. YR.	27 DATE OF LST MO. DA. YR.	28 SPECIAL REFERENCE 1-YES 2-ORDN 3-FLA 4-ROSE		
29 RET. PREFERENCE MO. DA. YR.	30 RETIREMENT DATA CODE	31 SEPARATION DATA CODE	32 CORRECTION CANCELLATION DATA TYPE MO. DA. YR.	33 SECURITY RISK NO.	
34 RET. PREFERENCE CODE 0-NO 1-5 YR 2-10 YR	35 SERV. COMP. DATE MO. DA. YR.	36 LONG. COMP. DATE MO. DA. YR.	37 CAREER CATEGORY CODE EAM 250 PROV/TEMP	38 REG. HEALTH INSURANCE CODE 0-NO 1-YES	39 SOCIAL SECURITY NO.
40 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		41 LEAVE CAT. CODE	42 FEDERAL TAX DATA FORM EXECUTED CODE 1-YES 2-NO		43 STATE TAX DATA FORM EXECUTED CODE 1-YES 2-NO
44 POSITION CONTROL CERTIFICATION			45 OF APPROVAL C42469/RK Carson B. Russell C42469		
DATE APPROVED					

FORM 1152 USE PREVIOUS EDITION

SECRET

EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET
(U Not Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 3 April 1969	
1 SERIAL NUMBER 036130		2 NAME (Last-First-Middle) FLORES, DANIEL			
3 NATURE OF PERSONNEL ACTION PROMOTION, TRANSFER TO NEW FUNDS, AND CHANGE OF SERVICE DESIGNATION		4 EFFECTIVE DATE REQUESTED MONTH 04 DAY 06 YEAR 69		5 CATEGORY OF EMPLOYMENT REGULAR	
6 FUNDS <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 20px; background-color: black; margin-right: 5px;"></div> <div> V TO V CF TO V </div> </div>		7 FINANCIAL ANALYSIS NO CHARGEABLE 9135 0884		8 LEGAL AUTHORITY (Completed by Office of Personnel)	
9 ORGANIZATIONAL DESIGNATIONS DDP7WH FOREIGN FIELD BRANCH #3 QUITO, ECUADOR STATION GUAYAQUIL, ECUADOR BASE		10 LOCATION OF OFFICIAL STATION GUAYAQUIL, ECUADOR			
11 POSITION TITLE OPS OFFICER		12 POSITION NUMBER 0376		13 CAREER SERVICE DESIGNATION D	
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15 OCCUPATIONAL SERIES 0136,01		16 GRADE AND STEP 09 2	
17 SALARY OR RATE \$ 8744					
18 REMARKS <p>X TO BE INTEGRATED. APPROVED 259a ATTACHED.</p> <p>FROM: DDP/WH/Branch 4/Pos. 1441. GS-08, step 2, \$7956/annum.</p> <p>I CONCUR IN CHANGE OF SERVICE DESIGNATION FROM SJ TO D:</p> <p><i>(Signed on original)</i> <u>3 Apr 69</u></p> <p align="right">CONCUR: <i>Arthur McNeil (Signature)</i> OTR/PERS</p>					
18A SIGNATURE OF REQUESTING OFFICIAL <i>Henry L. Berthold</i> HENRY L. BERTHOLD		DATE SIGNED 3 APR 69		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICIAL <i>Arthur McNeil</i> 4 APR 1969	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19 ACTION CODE 20 10	20 EMPLOY CODE 5170 WH	21 OFFICE CODING NUMERIC ALPHABETIC A559	22 STATION CODE 9559	23 INTEGRITY CODE	24 HOURS CODE 3
25 DATE OF BIRTH MO DA YR 08 04 35	26 DATE OF GRADE MO DA YR 04 06 69	27 DATE OF LST MO DA YR 04 06 69	28 DATE OF LST MO DA YR 04 06 69	29 DATE OF LST MO DA YR 04 06 69	30 DATE OF LST MO DA YR 04 06 69
31 RETIRABLE CODE 8-None 1-1 PT 2-10 PT	32 SPECIAL DEFENSE CODE 1-None 2-1 PT 3-10 PT	33 RETIREMENT DATA CODE 1-None 2-1 PT 3-10 PT	34 SEPARATION DATA CODE TYPE 1-None 2-1 PT 3-10 PT	35 CORRECTION CANCELLATION DATA TYPE 1-None 2-1 PT 3-10 PT	36 SECURITY RIG NO EOD DATA
37 NET PREFERENCE CODE 8-None 1-1 PT 2-10 PT	38 SERV COMP DATE MO DA YR 04 06 69	39 LONG COMP DATE MO DA YR 04 06 69	40 CAREER CATEGORY CODE 1-None 2-1 PT 3-10 PT	41 FEGLI HEALTH INSURANCE CODE 8-None 1-1 PT 2-10 PT	42 SOCIAL SECURITY NO
43 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 1-None 2-1 PT 3-10 PT		44 LEAF CAT CODE 1-None 2-1 PT 3-10 PT		45 FEDERAL TAX DATA CODE 1-None 2-1 PT 3-10 PT	
46 STATE TAX DATA CODE 1-None 2-1 PT 3-10 PT		47 NORM EXCLUDED CODE 1-None 2-1 PT 3-10 PT		48 STATE CODE CODE 1-None 2-1 PT 3-10 PT	
49 POSITION CONTROL CERTIFICATION			50 OF APPROVAL <i>Arthur McNeil</i>		
			DATE APPROVED 4 APR 69		

DATE PREPARED

1152 1961 PERMANENT EDITION

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(S) [REDACTED]
[REDACTED] [REDACTED] [REDACTED]

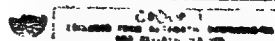
SECRET

(If Not Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1 SERIAL NUMBER 036130				2 NAME (Last-First-Middle) FLORES, Daniel	
3 NATURE OF PERSONNEL ACTION PROMOTION			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 05 15 68		5 CATEGORY OF EMPLOYMENT REGULAR
6 FUNDS XX	V TO V	V TO G	7 FINANCIAL ANALYSIS NO. CHARGEABLE 8375 2100		8 LEGAL AUTHORITY (Completed by Office of Personnel)
9 ORGANIZATIONAL DESIGNATIONS DCG/OTR CAREER TRAINING PROGRAM			10 LOCATION OF OFFICIAL STATION WASHINGTON, D.C.		
11 POSITION TITLE CAREER TRAINEE			12 POSITION NUMBER 0748	13 CAREER SERVICE DESIGNATION SJ	
14 CLASSIFICATION SCHEDULE (GS, I.R., etc.) GS		15 OCCUPATIONAL SERIES 0090.01	16 GRADE AND STEP 08 2	17 SALARY OR RATE \$ 7630	
18 REMARKS					
18A SIGNATURE OF REQUESTING OFFICIAL		DATE SIGNED	18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER Arthur T. McNeill Arthur T. McNeill, C/CTP		DATE SIGNED 6/13/68
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19 ACTION CODE 22	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC ALPHABETIC 08300 CTP	22 STATION CODE 75013	23 INTEGRAL CODE	24 NOTES CODE 1
25 DATE OF BIRTH MO. DA. YR. 08 05 35		26 DATE OF GRADE MO. DA. YR.		27 DATE OF LEI MO. DA. YR.	
28 WFE EXP-SES MO. DA. YR.	29 SPECIAL REFERENCE	30 RETIREMENT DATA 1-ELC 2-CRCS 3-FLA 4-POSS	31 SEPARATION DATA CODE	32 CORRECTION (CANCELLATION) DATA TYPE MO. DA. YR.	33 SECURITY ERS NO.
35 WFE PREFERENCE CODE 0-NONE 1-1 PT 2-10 PT		36 SERV COMP DATE MO. DA. YR.	37 LONG COMP DATE MO. DA. YR.	38 CAREER CATEGORY CODE 1-02 2-01 3-02	39 FEGLI HEALTH INSURANCE CODE 0-BASIS 1-WI
41 PREVIOUS (FEDERAL GOVERNMENT SERVICE) CODE 0-NO PREVIOUS SERVICE 1-NO OTHER SERVICE 2-BASIS OF SERVICE (LESS THAN 5 YEARS) 3-BASIS OF SERVICE (MORE THAN 5 YEARS)		42 LEAVE CAT CODE	43 FEDERAL TAB DATA FORM RESCUTED CODE 1-YES 2-NO		44 STATE TAB DATA FORM RESCUTED CODE 1-YES 2-NO
45 POSITION CONTROL CERTIFICATION RC 6 13 68			46 O.P. APPROVAL Edward T. McNeill		DATE APPROVED 6/13/68

FORM 1152 USE PREVIOUS EDITIONS

SECRET



SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED 28 November 1967	
1 SERIAL NUMBER 036130		2 NAME (Last-First-Middle) FLORES, Daniel									
3 NATURE OF PERSONNEL ACTION PROMOTION AND CHANGE OF SERVICE DESIGNATION						4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 12 22 67		5 CATEGORY OF EMPLOYMENT REGULAR			
6 FUNDS XX V TO V CF TO V		7 FINANCIAL ANALYSIS NO CHARGEABLE 8275 2100		8 LEGAL AUTHORITY (Completed by Office of Personnel)							
9 ORGANIZATIONAL DESIGNATIONS DDS/OTR CAREER TRAINING PROGRAM						10 LOCATION OF OFFICIAL STATION WASHINGTON, D.C.					
11 POSITION TITLE CAREER TRAINEE						12 POSITION NUMBER 0 748		13 CAREER SERVICE DESIGNATION SJ			
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15 OCCUPATIONAL SERIES 0090-21		16 GRADE AND STEP 07 22		17 SALARY OR RATE \$ 6664.6959					
18 REMARKS From: DDP/WH/COG/Intelligence Branch/Operations Support Section, #1174. Subject has concurred in Change of Service Designation from D to SJ.											
CONCUR: <u>Henry L. Berthold</u> Chief, WH Personnel											
19A SIGNATURE OF REQUESTING OFFICIAL Robert B. Freeman, C/CTP				DATE SIGNED		19B SIGNATURE OF CAREER SERVICE APPROVING OFFICER JOHN RICHARDSON, DTR		DATE SIGNED 11/28/67			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19 ACTION CODE 22	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC 28300	22 STATION CODE CTP	23 INTEGRAL CODE 76013	24 ROOTS CODE 1	25 DATE OF BIRTH MO DA YR 08 04 35	26 DATE OF GRADE MO DA YR 12 17 67	27 DATE OF LST MO DA YR 12 17 67			
28 WTE EXPIRES MO DA YR	29 SPECIAL REFERENCE	30 RETIREMENT DATA 1-YES 2-NO	31 SEPARATION DATA CODE	32 CORRECTION (AMENDMENT) DATA TYPE MO DA YR	EOD DATA		33 SECURITY REG NO	34 MIA			
35 PAY PREFERENCE CODE 0-NONE 1-1 PT 2-10 PT	36 SERV COMP DATE MO DA YR	37 LONG COMP DATE MO DA YR	38 CAREER CATEGORY CODE 1-00 2-00 3-00	39 PHYSICIAN HEALTH UPGRADER CODE 0-BEFORE 1-AFTER	40 SOCIAL SECURITY NO						
41 PREVIOUS (FEDERAL GOVERNMENT SERVICE) CODE 0-NO PREVIOUS SERVICE 1-NO SERVICE 2-SERVE 1 YEAR (1-10 YEARS) 3-SERVE 10 YEARS (10-20 YEARS)			42 LEAVE (LST) CODE	43 FOREIGN TAB DATA CODE 1-YES 2-NO	44 STATE TAB DATA CODE 1-YES 2-NO		45 STATE CODE CODE 1-YES 2-NO				
46 POSITION CONTROL CERTIFICATION RF 12-15					47 OFF APPROVAL Michael Pauljak 11/28/67			DATE APPROVED			

1152 USE PREVIOUS EDITION

SECRET

CONFIDENTIAL

26 October 1967

MEMORANDUM FOR: Daniel Flores

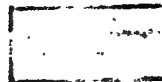
THROUGH : Executive Secretary
CSCT Selection Board

SUBJECT : Application for Career Training Program

1. I am pleased to inform you that you have been accepted for the Career Training Program. Let me congratulate you and wish you the maximum profit and pleasure from your proposed training.
2. You will remain with your present Component until the beginning of the next Integrated Training Program, to begin 11 December. At that time you will be reassigned to the CTP T/O where you will remain until your training has been completed.
3. Should you have any further questions, do not hesitate to call on the Program Officers.

ROBERT B. FREEMAN
Chief, CTP

CONFIDENTIAL



SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED																																																																									
						3, August 1967																																																																									
1 SERIAL NUMBER		2 NAME (Last-First-Middle)																																																																													
036130		FLORES DANIEL																																																																													
3 NATURE OF PERSONNEL ACTION				4 EFFECTIVE DATE REQUESTED		5 CATEGORY OF EMPLOYMENT																																																																									
PROMOTION & PAY ADJUSTMENT TO FULL TIME (CORRECTION)				01/07/67		REGULAR																																																																									
6 FUNDS		7 FINANCIAL ANALYSIS NO.		8 LEGAL AUTHORITY (Completed by Office of Personnel)																																																																											
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9 ORGANIZATIONAL DESIGNATIONS				10 LOCATION OF OFFICIAL STATION																																																																											
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11 POSITION TITLE				12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION																																																																									
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14 CLASSIFICATION SCHEDULE (G.S. 18, etc.)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE																																																																									
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18 REMARKS																																																																															
(FINANCIAL ANALYSIS NO. (#7) TO READ: 8235 0620)																																																																															
19 SIGNATURE OF PERSONNEL OFFICER		DATE SIGNED		20 SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED																																																																									
Henry L. Berthold		8/1/67		R. Graham		5/8/67																																																																									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																																																																															
<table border="1"> <tr> <td>19 ACTION CODE</td> <td>20 EMPLOY CODE</td> <td>21 OFFICE CODE</td> <td>22 STATION CODE</td> <td>23 OFFICE CODE</td> <td>24 CODE OF SERVICE</td> <td>25 DATE OF ENTRY</td> <td>26 DATE OF LEAVE</td> <td>27 DATE OF DEPT</td> </tr> <tr> <td>3-1</td> <td>10</td> <td>51500</td> <td>1011</td> <td>15023</td> <td>1</td> <td>1/1/67</td> <td></td> <td></td> </tr> <tr> <td>28 OFFICE CODE</td> <td>29 OFFICE CODE</td> <td>30 OFFICE CODE</td> <td>31 OFFICE CODE</td> <td>32 OFFICE CODE</td> <td>33 OFFICE CODE</td> <td>34 OFFICE CODE</td> <td>35 OFFICE CODE</td> <td>36 OFFICE CODE</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>37 OFFICE CODE</td> <td>38 OFFICE CODE</td> <td>39 OFFICE CODE</td> <td>40 OFFICE CODE</td> <td>41 OFFICE CODE</td> <td>42 OFFICE CODE</td> <td>43 OFFICE CODE</td> <td>44 OFFICE CODE</td> <td>45 OFFICE CODE</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>46 OFFICE CODE</td> <td>47 OFFICE CODE</td> <td>48 OFFICE CODE</td> <td>49 OFFICE CODE</td> <td>50 OFFICE CODE</td> <td>51 OFFICE CODE</td> <td>52 OFFICE CODE</td> <td>53 OFFICE CODE</td> <td>54 OFFICE CODE</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>								19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODE	22 STATION CODE	23 OFFICE CODE	24 CODE OF SERVICE	25 DATE OF ENTRY	26 DATE OF LEAVE	27 DATE OF DEPT	3-1	10	51500	1011	15023	1	1/1/67			28 OFFICE CODE	29 OFFICE CODE	30 OFFICE CODE	31 OFFICE CODE	32 OFFICE CODE	33 OFFICE CODE	34 OFFICE CODE	35 OFFICE CODE	36 OFFICE CODE										37 OFFICE CODE	38 OFFICE CODE	39 OFFICE CODE	40 OFFICE CODE	41 OFFICE CODE	42 OFFICE CODE	43 OFFICE CODE	44 OFFICE CODE	45 OFFICE CODE										46 OFFICE CODE	47 OFFICE CODE	48 OFFICE CODE	49 OFFICE CODE	50 OFFICE CODE	51 OFFICE CODE	52 OFFICE CODE	53 OFFICE CODE	54 OFFICE CODE									
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(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
				22 June 1967	
1. SERIAL NUMBER 036130		2. NAME (Last-First-Middle) FLORES DANIEL			
3. NATURE OF PERSONNEL ACTION PROMOTION + Pay Adjustment to Full Time			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 07 30 67		5. CATEGORY OF EMPLOYMENT REGULAR PART-TIME
6. FUNDS X V TO V CF TO V			7. FINANCIAL ANALYSIS NO CHARGEABLE 8235 1162		8. LEGAL AUTHORITY (Completed by Office of Personnel)
9. ORGANIZATIONAL DESIGNATIONS DDP/WH WH/COG INTELLIGENCE BRANCH OPERATIONAL SUPPORT SECTION			10. LOCATION OF OFFICIAL STATION WASH., D.C.		
11. POSITION TITLE INTELLIGENCE CLERK ASST (V)			12. POSITION NUMBER 1174		13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (G, L.B. etc.) GS		15. OCCUPATIONAL SERIES 0301.28		17. SALARY OR RATE 6,626.30	
16. REMARKS Subject is returning to full-time duty on ³⁰ July 1967. Subject will graduate from Georgetown Univ. this month.					
18. SIGNATURE OF REQUESTER Robert D. Cashman C/WH/Pers		DATE SIGNED 28 June		19. SIGNATURE OF CAREER SERVICE APPROVING OFFICER [Signature] DATE SIGNED 7 July	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 22	20. EMPLOY CODE 10	21. OFFICE CODES ALPHABETIC G/WH	22. STATION CODE 750.3	23. INITIALS CODE 1	24. MODIFIERS CODE 08 04 13
25. DATE OF BIRTH 12/30/61	26. DATE OF GRADE 12/30/61	27. DATE OF LHI 12/30/67	28. LOD DATA		
29. PAY GRADE GS-10	30. PAY RATE \$10.00	31. PAY ADJUSTMENT 1-10	32. PAY ADJUSTMENT 1-10	33. PAY ADJUSTMENT 1-10	34. PAY ADJUSTMENT 1-10
35. PAY ADJUSTMENT 1-10	36. PAY ADJUSTMENT 1-10	37. PAY ADJUSTMENT 1-10	38. PAY ADJUSTMENT 1-10	39. PAY ADJUSTMENT 1-10	40. PAY ADJUSTMENT 1-10
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97. PAY ADJUSTMENT 1-10					
98. PAY ADJUSTMENT 1-10					
99. PAY ADJUSTMENT 1-10					
100. PAY ADJUSTMENT 1-10					

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SECRET

Jan 29

MEMORANDUM FOR: Secretary CSCS Panel, Section D

**SUBJECT : Recommendation for the Promotion of Mr.
Daniel Flores From GS-05 to GS-06.**

1. Mr. Flores has been working in WH/COG and its predecessor groups since 1963. His fitness reports have been consistently good and the comments of his supervisors laudatory. In mid-1965 Mr. Flores was changed from full-time to part-time staff employee in order to allow him to attend American University on a full-time basis. His course of study leads to a Bachelor's Degree in Political Science with emphasis in Latin American affairs. Mr. Flores has made the Dean's List the past two semesters and will receive his degree in August 1967.

2. Throughout his career Mr. Flores has shown himself to be a strongly motivated employee, willing and capable. The calibre of his performance has been consistently good and he has shown steady improvement as he acquired the skills and knowledge of intelligence business. He is reliable and conscientious and we have good reason to expect that he will develop into a very competent operations officer. He will apply for the CT program in September and his application will be wholeheartedly supported by WH/COG.

3. In WH/COG Mr. Flores has served as an Intelligence Assistant in support of CI operations. In addition he has assisted in the training of agents in radio and secret writing communications. Mr. Flores is bi-lingual - Spanish and English - and is adept as an operational Translator-Interpreter.

4. Mr. Flores was promoted to GS-05 on 16 March 1964. He has been performing duties at GS-06 level for the past two years and it is sincerely recommended that he be promoted promptly to GS-06.

William V. Broo
William V. Broo
Chief
Western Hemisphere Division

SECRET

2

1880-1881

REQUEST FOR PERSONNEL ACTION										DATE PREPARED 14 Sep 66	
1. SERIAL NUMBER 036130		2. NAME (Last-First-Middle) FLOREN DANTEL									
3. NATURE OF PERSONNEL ACTION "CHANGE PERSON"					4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 08/19/66			5. CATEGORY OF EMPLOYMENT PART TIME			
6. FUNDS X		V TO V		V TO CF		7. COST CENTER NO. CHARGE ARE 7235 1162		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS TOP/WH WH/C INTELLIGENCE BRANCH OPERATIONAL SUPPORT SECTION					10. LOCATION OF OFFICIAL STATION WASH., D.C.						
11. POSITION TITLE INTELLIGENCE CLERK					12. POSITION NUMBER 1176			13. CAREER SERVICE DESIGNATION d			
14. CLASSIFICATION SCHEDULE (GS, FS, etc.) 33			15. OCCUPATIONAL SERIES 0301.27		16. GRADE AND STEP 05 4		17. SALARY OR RATE \$ 5859.				
18. REMARKS From: WH/C.Intel Br., R & R Sec.DC # 1104											
19A. SIGNATURE OF REQUESTING OFFICIAL Robert H. Gashann, GAT/Per				DATE SIGNED 14 Sep 66		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER Kelia T. ...				DATE SIGNED 11/14/66	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE 37 80		20. EMPLOY CODE		21. OFFICE CODING NUMERIC ALPHABETIC 54500 WH		22. STATION CODE 25213		23. INTEGER CODE		24. MOBILE CODE	
25. DATE OF BIRTH MO DA YR 08/04/35		26. DATE OF GRADE MO DA YR		27. DATE OF LEI MO DA YR		28. DATE OF BIRTH MO DA YR		29. DATE OF GRADE MO DA YR		30. DATE OF LEI MO DA YR	
31. RETIREMENT DATA 1-CR 2-FCR 3-BOB		32. SEPARATION DATA CODE		33. CORRECTION CANCELLATION DATA TYPE MO DA YR		34. SECURITY REQ NO		35. SEC		36. SEC	
37. VET PREFERENCE CODE 1-10 1-10 2-10 3-10		38. SERV COMP DATE MO DA YR		39. LONG COMP DATE MO DA YR		40. CAREER CATEGORY CODE 1-10 1-10 2-10 3-10		41. LEGAL HEALTH INSURANCE CODE 1-10 1-10 2-10 3-10		42. SOCIAL SECURITY NO	
43. PREVIOUS GOVERNMENT SERVICE DATA CODE 1-10 1-10 2-10 3-10				44. LEAVE ENT CODE		45. FEDERAL TAX DATA CODE 1-10 1-10 2-10 3-10		46. STATE TAX DATA CODE 1-10 1-10 2-10 3-10		47. STATE CODE	
48. POSITION CONTROL CERTIFICATION 09-19-66A						49. APPROVAL M. ...			50. DATE APPROVED		

SECRET
(When Filled In)

9 September 1966

MEMORANDUM FOR: Mr. Daniel Flores

THROUGH : Head of CS Career Service

SUBJECT : Notification of Non-eligibility for Designation as a
Participant in the CIA Retirement and Disability System

1. As you may know, we are in the process of reviewing the employment history and current career field of all employees in the Agency to identify those who are eligible for designation as a participant in the new CIA Retirement and Disability System. In this process, the initial review of each case is made by the individual's Career Service. If the Head of his Career Service nominates him for participation in the System, this nomination is reviewed by the CIA Retirement Board which recommends final action to me. However, if the Head of the Career Service advises that the employee does not meet the basic requirements of HR 20-50 for participation, I have accepted this finding without further review by the CIA Retirement Board. This practice has been adopted in the interest of expediting this screening process so that those employees who are eligible to participate in the System may be designated participants as soon as possible.

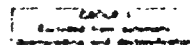
2. In your case, the Head of your Career Service has advised me that you do not meet the requirements of HR 20-50 for designation as a participant and I have accordingly made the formal determination required by the regulation that you are not eligible for designation. This in no way affects your current status under the Civil Service Retirement System, nor does it preclude reconsideration of your eligibility to participate in the CIA System if you should meet the requirements for designation in the future.

3. Should you desire further information concerning the requirements for designation as a participant in the CIA Retirement System, I suggest that you read paragraph e of HR 20-50 and paragraph 5 of the Employee Bulletin dated 30 July 1965, entitled "Public Law 88-643, The Central Intelligence Agency Retirement Act of 1964 for Certain Employees."

4. It is always possible that the records upon which the determination made in your case may have been incomplete or inaccurate regarding your actual employment history with the Agency. If, after studying the materials cited above, you have questions regarding the determination that you are not eligible to participate in the CIA Retirement System, please feel free to contact officials of your Career Service. They are familiar with the details of your case and will gladly discuss them with you. In addition, you may wish to discuss your case with the CIA Retirement Staff located in Room 205, Magazine Building (extension 2847). If such discussions do not resolve any questions you have regarding your eligibility, you may request that your case be formally considered by the CIA Retirement Board. However, this request must be made within 30 days of the date of this memorandum.


Emmett D. Echols
Director of Personnel

SECRET



SECRET**CENTRAL INTELLIGENCE AGENCY**
WASHINGTON, D.C. 20505**17 JAN 1966****Claimant: Daniel Flores**
File No.: 7000438

Mr. Wilfred J. Harren
Chief of Section
Division of Claims Services
Bureau of Employees' Compensation
Washington, D. C. 20211

Dear Mr. Harren:

Reference is made to Subject's claim for benefits of the
Federal Employees' Compensation Act.

Enclosed is additional information submitted by claimant.

If we may be of further assistance in this matter, please
so advise.

Very truly yours,

/s/ B. DeFelice

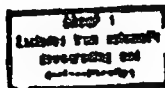
B. DeFelice
Office of Personnel

Enclosures:

As stated

Distribution:

O-addressee, 1-D/Pers, 1-BCB
OP/BSB/BCB/KLowden:slh(14 January 1966)

SECRET

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER 036130		2. NAME (Last-First-Middle) HARRIS, Daniel			
3. NATURE OF PERSONNEL ACTION TRANSFERRANT			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 08 1 1965		5. CATEGORY OF EMPLOYMENT Part Time
6. FUNDS	X	V TO V	V TO CF	7. COST CENTER NO. CHARGE ABLE 6235-1162	8. LEGAL AUTHORITY (Completed by Office of Personnel)
9. ORGANIZATIONAL DESIGNATIONS DEP/WH WH/C Intelligence Branch Reports and Requirements Section			10. LOCATION OF OFFICIAL STATION Washington, D.C.		
11. POSITION TITLE TITEL. <i>Spice</i> CIC/WHK (1)			12. POSITION NUMBER 1184	13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LH, etc.) GS (06)		15. OCCUPATIONAL SERIES 0301.27	16. GRADE AND STEP 05 (3)	17. SALARY OR RATE \$ 5330	
18. REMARKS From: DEP/WH/CI St., #1130, D.C.					
18a. SIGNATURE OF REQUESTING OFFICIAL <i>Robert D. Graham, CAP/WHK</i>			DATE SIGNED 13 Aug 65	18b. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>K. G. 27, [Signature]</i>	
DATE SIGNED 8/20/65					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 37	20. EMPLOY CODE 20	21. OFFICE CODING NUMERIC ALPHABETIC 51501 V/H	22. STATION CODE 75815	23. INTEGREE CODE	24. HQ/RTS CODE 1 02 04 135
25. DATE OF BIRTH MO DA YR 1 02 1935	26. DATE OF GRADE MO DA YR	27. DATE OF LEI MO DA YR	28. DATE OF LEI MO DA YR		
29. SPECIAL REFERENCE	30. RETIREMENT DATA 1-ESC 2-FER 3-NONE	31. SEPARATION DATA CODE	32. CORRECTION, CANCELLATION DATA TYPE MO DA YR	33. SECURITY REG NO	
34. NET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT	35. SERV COMP DATE MO DA YR	36. LONG COMP DATE MO DA YR	37. CAREER CATEGORY CODE 0-NONE 1-YES 2-NO	38. FEDL HEALTH INSURANCE CODE 0-NONE 1-YES 2-NO	39. SOCIAL SECURITY NO
40. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NONE 1-NO DELAY IN SERVICE 2-DELAY IN SERVICE (LESS THAN 3 YEARS) 3-DELAY IN SERVICE (MORE THAN 3 YEARS)		41. LEAVE CAT CODE	42. FEDERAL TAX DATA CODE 0-NONE 1-YES 2-NO		43. STATE TAX DATA CODE 0-NONE 1-YES 2-NO
44. POSITION CONTROL CERTIFICATION 9-10-65 W/L			45. O.P. APPROVAL <i>K. G. 27, [Signature]</i>		DATE APPROVED 8/20/65

Recorded by
CSPD
[Signature]

FORM 1152 USE PREVIOUS EDITION
8-63

SECRET

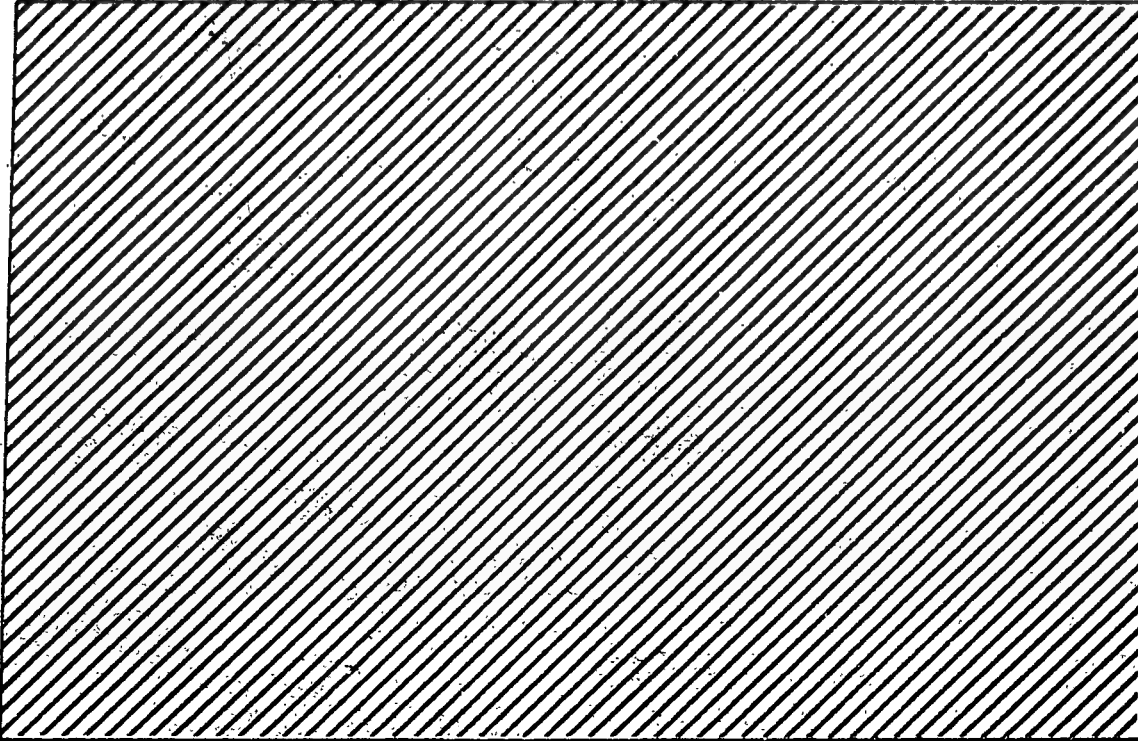
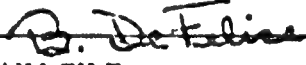
GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

~~SECRET~~
(10 Item Deleted Item)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 15 January 1965											
1 SERIAL NUMBER 036130		2 NAME (Last-First-Middle) FLORES, Daniel															
3 NATURE OF PERSONNEL ACTION PAY ADJUSTMENT (TO PART TIME) FROM FULL TIME				4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 02 08 65		5 CATEGORY OF EMPLOYMENT CASUAL (PART TIME)											
6 FUNDS X V TO V CF TO V		7 COST CENTER NO CHARGE 5235-1162		8 LEGAL AUTHORITY (Completed by Office of Personnel)													
9 ORGANIZATIONAL DESIGNATIONS DFP Special Affairs Staff Counter-Intelligence Staff Operations Section				10 LOCATION OF OFFICIAL STATION Washington, D.C.													
11 POSITION TITLE INTELLIGENCE ASST. (W)				12 POSITION NUMBER 1130		13 CAREER SERVICE DESIGNATION D											
14 CLASSIFICATION SCHEDULE (G.S., I.B., etc.) GS (35)		15 OCCUPATIONAL SERIES 0301.23		16 GRADE AND STEP 05 (2)		17 SALARY OR RATE \$ 5165											
18 REMARKS Subject to work on regularly scheduled tour not to exceed 19 hours per week. Subject will be working Monday through Friday, from 1400 to 1700.																	
19A SIGNATURE OF REQUESTING OFFICIAL ROBERT D. CASHMAN, C/WH/Pers.								DATE SIGNED 12/2/65		19B SIGNATURE OF CAREER SERVICE APPROVING OFFICER N. J. ...		DATE SIGNED 12/2/65					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																	
19 ACTION CODE 28		20 EMPLOY CODE 36		21 OFFICE CODING NUMERIC ALPHABETIC 47/60 14.2		22 STATION CODE 2501		23 INTEGRITY CODE		24 HOURS CODE 1		25 DATE OF BIRTH MO. DA. YR. 03 04 13		26 DATE OF GRADE MO. DA. YR. 03 16 64		27 DATE OF LBI MO. DA. YR. 03 16 64	
28 WFE EXPIRES MO. DA. YR.		29 SPECIAL REFERENCE		30 RETIREMENT DATA 1-TSE 2-FICA 3-NONE		31 SEPARATION DATA CODE		32 CORRECTION/CANCELLATION DATA TYPE MO. DA. YR.		EOD DATA →		33 SECURITY REQ NO		34 SEX			
35 VET PREFERENCE CODE 0-B-NONE 1-5 PT 2-10 PT		36 SERV COMP DATE MO. DA. YR.		37 LONG COMP DATE MO. DA. YR.		38 CAREER CATEGORY CAR DIST PROG TEMP		39 REGI HEALTH INSURANCE CODE 0-B-WHITE 1-YEL		HEALTH INS CODE		40 SOCIAL SECURITY NO					
41 PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NO PREVIOUS SERVICE 1-NO DURING IN SERVICE 2-UNLAW IN SERVICE (LESS THAN 3 YEARS) 3-UNLAW IN SERVICE (MORE THAN 3 YEARS)				42 LEAVE CAT CODE		43 FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS 1-YES 2-NO				44 STATE TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS 1-YES 2-NO							
45 POSITION CONTROL CERTIFICATION J.K. Kearney 02/05/65								46 OF APPROVAL N. J. ...				DATE APPROVED					

SECRET

(When Filled In)

		
NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT*	CLAIM NUMBER
Floran, Daniel	Self	63-514
<p>There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on <u>3 September 1964</u>.</p> <p>This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.</p>		
DATE OF NOTICE	SIGNATURE OF BGD REPRESENTATIVE	
12 JUN 1965		
NOTICE OF OFFICIAL DISABILITY CLAIM FILE		

6 January 1965

MEMORANDUM FOR: Chief, CSPO

SUBJECT : Conversion to Part-Time Staff Employment
Mr. Daniel Flores

1. Mr. Daniel Flores is an Intelligence Assistant, GS-07, assigned to the CI Staff of WH/SA. He is currently pursuing a program of studies in Government at the American University with special concentration on Latin American Affairs. To complete the major portion of his remaining requirements for the bachelor's degree, he is planning to attend the University full-time for a year. Any requirements still outstanding at the end of that period would be completed at night.

2. The employee's duties in the CI Staff involves the translation of W/T and SW messages received from and sent to agents in Cuba, assisting in the training of agents in SW and communications procedures, and miscellaneous support functions in the CI Branch. He has proved invaluable because he has native fluency in every-day Spanish and is familiar with SW and communication techniques, problems, and training procedures. In addition to Mr. Flores' utility for such cases as may arise in the future, he is personally acquainted with two of the double agents now in place in Cuba and with the numerous problems which constantly arise in their handling.

3. In view of the need for Mr. Flores' services, the Chief, CI Staff, has asked the employee if he would be willing to continue in his present capacity on a part-time basis. The employee has indicated that he would accept such an arrangement. It is accordingly requested that WH/SA be permitted to convert him from a full-time staff employee to one employed on a part-time, regular tour of duty basis. Subject would be utilized for a total of 18 hours per week, the maximum time that his school program will permit him to devote to Agency duties.


Robert D. Cashman
C/WH/Personnel

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

22 July 1964

1 SERIAL NUMBER 036130		2 NAME (Last-First-Middle) FLORES, Daniel	
3 NATURE OF PERSONNEL ACTION Reassignment		4 EFFECTIVE DATE REQUESTED MONTH 08 DAY 15 YEAR 64	
5 CATEGORY OF EMPLOYMENT Regular		6 FUNDS X V TO V CF TO V	
7 COST CENTER NO. CHARGE 5235-1162		8 LEGAL AUTHORITY (Completed by Office of Personnel)	
9 ORGANIZATIONAL ASSIGNATIONS DDP SAS Counter-Intell Staff Operations Section		10 LOCATION OF OFFICIAL STATION Wash., D.C.	
11 POSITION TITLE Intelligence Asst		12 POSITION NUMBER 1130	
13 CAREER SERVICE DESIGNATION D		14 CLASSIFICATION OF SERVICE (GS, E, etc.) GS	
15 OCCUPATIONAL SERIES 0301.28		16 GRADE AND STEP 05 (2)	
17 SALARY OR RATE \$ 4850		18 REMARKS From: SAS No. 0922 trans 37F	
19A SIGNATURE OF REQUESTING OFFICER <i>Robert D. Cashman</i>		DATE SIGNED 27 Jul 64	
19B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>William Graham</i>		DATE SIGNED 31 July 1964	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19 ACTION CODE 37	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC 49150 ALPHABETIC 525	22 STATION CODE 74013
23 INTEGRATE CODE 1	24 HOURS CODE 1	25 DATE OF BIRTH MO 08 DA 15 YR 1935	26 DATE OF GRADE MO 08 DA 15 YR 64
27 DATE OF LIT MO 08 DA 15 YR 64	28 SECURITY MO 08 DA 15 YR 64	29 SPECIAL REFERENCE 1-CM 2-FRE 3-BOB	30 RETIREMENT DATA CODE
31 SEPARATION DATA CODE	32 CORRECTION LABELLING DATA TYPE 1 MO 08 DA 15 YR 64	33 SOCIAL SECURITY NO.	34 SEX
35 VET PREFERENCE CODE 0 GRADE 1-1 PT 1-1	36 SALT COMP DATE MO 08 DA 15 YR 64	37 LONG COMP DATE MO 08 DA 15 YR 64	38 CAREER CATEGORY CODE 1 COME 1-1
39 HEALTH INSURANCE CODE 1-1	40 SOCIAL SECURITY NO.	41 PREVIOUS ASSIGNMENT SERVICE DATA CODE 0 GRADE 1-1 PT 1-1	42 LEAVE CAT CODE
43 FEDERAL TAX DATA CODE 1-1 COME 1-1	44 STATE TAX DATA CODE 1-1 COME 1-1	45 SOCIAL SECURITY NO.	46 SEX
47 POSITION (Previous Location)	48 OFF APPOINTMENT <i>William Graham</i>	49 DATE APPOINTED 31 July 1964	

Recorded by
CSPD

EOD DATA

SECRET


19 December 1963

MEMORANDUM FOR: Clandestine Services,
Career Services Panel

SUBJECT : Mr. Daniel Flores -
Recommendation for Promotion

1. Mr. Flores has been with the Agency for about eighteen (18) months and has been a member of SAS since June 1963. During the six (6) months he has been with SAS he has demonstrated intelligence and initiative. In addition to his fulfilling his primary responsibility as a translator, he quickly picked up the knowledge and experience necessary for an Intelligence Assistant in the Operations Support Section. His duties and responsibilities accordingly have been broadened. He has demonstrated ability to function independently as a member of the Operations Support Staff. He is cooperative and has maintained a cheerful disposition under pressure and through many late hours and weekends of duty.

2. In view of his excellent performance in SAS, his intelligence and ability, and his growth potential for a career in CIA, I strongly recommend that he be promoted to GS-5 as soon as possible.


JOHN K. KING
Chief, SAS/Intel

APPROVAL RECOMMENDED

DESMOND FITZGERALD
Chief, Special Affairs Staff

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED							
1. SERIAL NUMBER										25 September 1961							
2. NAME (Last-First-Middle)																	
FLORES Daniel																	
3. NATURE OF PERSONNEL ACTION										4. EFFECTIVE DATE REQUESTED		5. CATEGORY OF EMPLOYMENT					
Excepted Appointment										03/11/62		Regular					
6. FUNDS										7. POST CENTER NO. CHARGEABLE		8. LEGAL AUTHORITY (Completed by Office of Personnel)					
X V TO V										2226 1200 1000							
CP TO V																	
9. ORGANIZATIONAL DESIGNATIONS										10. LOCATION OF OFFICIAL STATION							
DDP OPSER R I DIV Reference Branch Index Section - Night Shift										Wash., D. C.							
11. POSITION TITLE										12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION					
File Clerk										0147		D					
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)										15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS										0305.01		04 1		4040			
18. REMARKS																	
Regular tour of duty 3:30 PM to 12:00 PM daily																	
Subject to trial period and actual																	
19. SIGNATURE OF REQUESTING OFFICIAL										20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER							
John M. Wigglesworth, Chief, RID/ADM.										James W. Washburn							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																	
21. OFFICE CODING										22. STATION CODE		23. WORKING CODE		24. DATE OF BIRTH		25. DATE OF DEATH	
11 10 39460 RI												1 28 04 135		03/11/62 03/11/62			
26. DATE EMP RES										27. DATE OF RES		28. DATE OF RES		29. DATE OF RES		30. DATE OF RES	
31. DATE OF RES										32. DATE OF RES		33. DATE OF RES		34. DATE OF RES		35. DATE OF RES	
36. DATE OF RES										37. DATE OF RES		38. DATE OF RES		39. DATE OF RES		40. DATE OF RES	
41. DATE OF RES										42. DATE OF RES		43. DATE OF RES		44. DATE OF RES		45. DATE OF RES	
46. DATE OF RES										47. DATE OF RES		48. DATE OF RES		49. DATE OF RES		50. DATE OF RES	
41. PREVIOUS EMPLOYMENT SERVICE DATA										42. PREVIOUS EMPLOYMENT SERVICE DATA		43. PREVIOUS EMPLOYMENT SERVICE DATA		44. PREVIOUS EMPLOYMENT SERVICE DATA		45. PREVIOUS EMPLOYMENT SERVICE DATA	
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46. POSITION CONTROL CERTIFICATION										47. O.P. APPROVAL							

14 February 1962

Mr. Daniel Flores
Apartment 203
2828 Connecticut Avenue, N. W.
Washington 8, D. C.

Dear Mr. Flores:

We are pleased to inform you that your appointment with this Agency has been approved at Grade GS-4, salary \$4040.00 per annum, as Clerk.

Your permanent employment will depend upon the completion of the following processing at the time of entering on duty: taking the oath of office, signing a loyalty affidavit, participating in a final security interview. Should anything of an unfavorable nature arise during this period, your employment will not result in a permanent appointment.

We hope you will be able to join us at an early date. Please dial 351-2781 and ask for Mrs. Shirley Wells, as soon as possible, in order to arrange an entrance-on-duty date. We would appreciate your selecting a Monday.

Please report to the Receptionist at 1016 - 16th Street, N. W., Room 201 at 8:15 a.m. and ask for Mrs. Wells on the reporting for duty date that you establish with this office. This address is located on 16th Street between K and L Streets opposite Hotel Statler.

Your gross earnings will be subject to deductions for Federal income tax and 6 1/2 percent for the United States Civil Service Retirement Fund. In addition, the benefits of low-cost group life insurance, which will be discussed with you at the time of your entrance on duty, are available to Federal civilian employees. This insurance is not obligatory. However, if you do not wish coverage, which is automatic, you should sign a Waiver of Life Insurance Coverage form at the time you enter on duty.

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You will not receive a pay check for approximately four weeks after your entrance on duty.

If you have any problems, Mrs. Wells will be glad to discuss them with you when you call.

Very truly yours,

E. D. Echols
Director of Personnel

OP/Corres/mjt
File sent to: Shirley Wells

26 January 1962

Mr. Daniel Flores
Apartment 203
2828 Connecticut Avenue, N. W.
Washington 8, D. C.

Dear Mr. Flores:

Processing of your application for employment with this Agency is continuing. Please advise us if any circumstance should arise which might affect your interest in a position with us.

Your continued interest and patience are appreciated.

Very truly yours,

E. D. Echols
Director of Personnel

OP/Corres/sjm
File sent to: Wells

20 October 1961

Mr. Daniel Flores
Apartment 203
2828 Connecticut Avenue, N. W.
Washington 8, D. C.

Dear Mr. Flores:

In connection with your application with this Agency, it will be necessary for you to come to our Medical Office in Central Building, 2430 E Street, N. W., for a pre-employment medical examination which will include determination of physical health and emotional stability.

An appointment may be scheduled by dialing 351-2781 and asking for Mrs. Shirley Wells.

Very truly yours,

E. D. Echols
Director of Personnel

OP/Corres/cas
file sent to shirley wells

12 October 1961

Mr. Daniel Flores
Apartment 203
2828 Connecticut Avenue, N. W.
Washington 8, D. C.

Dear Mr. Flores:

Your application for employment with this Agency has been reviewed with interest and the processing of your case has been initiated for a full-time position on the 3:30 p.m. to 12:00 p.m. shift at Grade GS-4, salary \$4040.00 per annum, plus a ten percent night differential for the hours from 6:00 p.m. to 12:00 p.m., as Clerk.

Your final appointment is dependent upon a number of factors including character and reference investigations, and other processing procedures which may require as long as 120 days. You may be sure that this processing is being accomplished as rapidly as possible.

During this period please notify us of any changes in your present status such as change in address, employment, marital status, etc. If you cannot accept the position or if you have any questions concerning your application, you should write to Mrs. Shirley Wells.

Members of this Agency are entitled to the regular United States Government leave and retirement benefits. Our salaries conform to the rates prescribed by Congress for United States Government agencies.

Thank you for your cooperation and patience during this waiting period.

Very truly yours,

A. D. Echols
Director of Personnel

OP/Corres/car
file sent to shirley wells

SECRET
(When Filled In)

REQUEST FOR SECURITY CLEARANCE				REQUEST NO. (1-51) <div style="border: 1px solid black; display: inline-block; padding: 2px;">07:00</div>	
NAME (LAST - FIRST - MIDDLE) FLORES, DANIEL				REQUEST DATE (10-11) 6 October 1961	
POSITION TITLE FILE CLERK				YEAR OF BIRTH (20-30) 4 August 1935	
POSITION NUMBER (31 - 35) 0117		OCCUP. CODE (37 - 43) 0305.01		GRADE (45-46) GS-04	
LOCATION (CITY, STATE, COUNTRY) WASHINGTON, D. C.		ASSIGNMENT (OFFICE, DIVISION, BRANCH) DDP/OPSER		ORGN. CODE (48-50) 3900	
TYPE OF APPLICANT <input checked="" type="checkbox"/> REGULAR <input type="checkbox"/> CONSULTANT <input type="checkbox"/> CONTRACT <input type="checkbox"/> MILITARY		CONVERSION ACTION		IF OTHER, SPECIFY:	
NAME OF REQUESTER (OR OFFICIAL)		TYPE OF ASSIGNMENT AND FUND <input checked="" type="checkbox"/> HOS <input type="checkbox"/> USF <input type="checkbox"/> PF <input checked="" type="checkbox"/> V <input type="checkbox"/> UV			
CLEARANCE REQUIRED		PROVISIONAL FOR (INDICATE NAME OF POOL OR GROUP)		HOS/TS & FUND (50) 1	
ATTACHMENTS		<input checked="" type="checkbox"/> PERSONAL HISTORY STATEMENT <input checked="" type="checkbox"/> APPENDIX I <input checked="" type="checkbox"/> PHOTOGRAPHIC <input type="checkbox"/> APPENDIX II		REQUEST FOR WAIVER <input checked="" type="checkbox"/> REPORT OF INTERVIEW	
VETERANS STATUS		<input checked="" type="checkbox"/> MALE - VETERAN <input type="checkbox"/> FEMALE - VETERAN <input type="checkbox"/> MALE - NON-VETERAN <input type="checkbox"/> FEMALE - NON-VETERAN		CLEARANCE (51) 3	
				RECRUIT. CODE (52-54) 105	
				VET PREP. & SER (55)	

PULL REQUESTED 6 October 1961

Regular tour of duty 3:30 PM to 12:00 PM daily.

1 - SO
1 - OTR

SPACE BELOW FOR OS USE ONLY

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(9)

15 September 1961

Mr. Daniel Flores
Apartment 203
2828 Connecticut Avenue, N. W.
Washington 8, D. C.

Dear Mr. Flores:

Appropriate members of our staff are reviewing your application for employment to determine whether we have a position available for a person of your qualifications. Although we cannot predict the length of time needed for this review, every effort will be made to reach an early decision. We will keep you as fully informed as possible regarding the status of your case.

Very truly yours,

E. D. Echols
Director of Personnel

OP/Corres-bt
file sent to Mr. Washam

CONFIDENTIAL
(When Filled In)

REPORT OF INTERVIEW		DATE OF INTERVIEW 21 August 1961	SOURCE gen info
CANDIDATE (Last, First, Middle) Flores, Daniel		PLACE OF BIRTH San Marcos, Texas	DATE OF BIRTH 4 August 1935
TEMPORARY ADDRESS		PHONE	
PERMANENT ADDRESS 2828 Connecticut Avenue, N.W., Apt. 203, Washington, D.C.		PHONE 265-8322	
BUSINESS ADDRESS		PHONE	
PLACE OF INTERVIEW 15th St		DATE AVAILABLE Immediately on clearance	
RECM (Office, serial) RI clerk 3:30-midnight		GS- 4	TESTS SET
<p align="right">19-32-33-84</p> <p>Mr. Flores had just been recently released from active duty with the USMC when he came in for interview. He has served two tours which included Security guard Embassy duty in Peru and Bolivia. His wife was formerly stationed at the Embassy with Dept. of State. He appears to be a mature young man, clean cut, neat appearance, dark complexion and coloring. He is planning to continue his college education at C.U. and is available to work the 3:30 - midnight RI shift. A clerical position at the GS-4 level was discussed in the interview. His wife is a secretary with a law firm in town; they have no children.</p> <p>ANEX</p> <p>Mr. Flores is in excellent health and had a very good record with the Marine Corps. Known of nothing in his background that would be unfavorable in event of reference check. At initial interview he stated that he had no foreign connections, however, after contacting his family in Texas it was determined that his step-mother was born in Mexico and although she came to the US in 1922, she has never become a US citizen.</p> <p>Full clearance.</p>			
DATE SENT TO HQ: 85 - 61		INTERVIEWER: Joy Cooney	

FORM 1-60 1667a

CONFIDENTIAL

16-00000

CENTRAL INTELLIGENCE AGENCY

WASHINGTON 25, D. C.

**Applicant Information
Sheet No. 1**

**To all persons applying for employment
with the Central Intelligence Agency:**

**This paper is the first step in applying for employment or consultant
status with the Central Intelligence Agency. No application may proceed
beyond this first step if the applicant is not in agreement with the condi-
tions stated below:**

General Considerations:

- 1. The National Security Act of 26 July 1947 (Public Law 253, 80th Congress) which created the Central Intelligence Agency places upon the Agency the responsibility:**
 - a. "to advise the National Security Council in matters concerning such intelligence activities of the Government departments and agencies as relate to the national security;**
 - b. "to make recommendations to the National Security Council for the coordination of such intelligence activities of the departments and agencies of the Government as relate to the national security;**
 - c. "to correlate and evaluate intelligence relating to the national security, and provide for the appropriate dissemination of such intelligence within the Government . . . ;**
 - d. "to perform, for the benefit of the existing intelligence agencies, such additional services of common concern as the National Security Council determines can be more efficiently accomplished centrally;**
 - e. "to perform such other functions and duties related to intelligence affecting the national security as the National Security Council may from time to time direct."**

14-00000

The special character of this national responsibility requires the Agency to maintain correspondingly special employment criteria which may be different from the routine or normal employment standards of other Government departments and agencies which do not have the highly sensitive responsibility borne by the Central Intelligence Agency. It follows that the investigation of applicants prerequisite to their acceptance is a time-consuming process which, in addition to loyalty and security checks, includes evaluation of competence, physical and emotional fitness, and availability of a suitable position at such time as employment may be offered. This is called "clearance" of an applicant.

2. Investigation of an applicant may reveal something which prevents his clearance - perhaps something of which the applicant is genuinely unaware, perhaps something which only the special employment criteria of the Agency make unacceptable. In any event, adverse findings by the Agency are conclusive and final so far as the Agency is concerned, and no statement of specific reasons is made to the applicant.

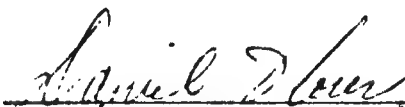
3. Employment by the Central Intelligence Agency is not a right upon which an applicant can insist. Offer of employment which is subject to full clearance does not constitute a commitment on the Agency's part giving an unsuccessful applicant grounds for any claim against the Agency. Acceptance of employment upon the condition of clearance is at the applicant's risk, taken with the knowledge that a very substantial percentage of applicants are not cleared.

Statement of Understanding
and Agreement

I have read, understand, and agree to the foregoing General Considerations. If not accepted for employment by the Central Intelligence Agency, I will make no claim or demand in conflict with those considerations.

I have also seen and read Applicant Information Sheet No. 2.

SIGNED at Washington, D. C., this 10th day of September, 1961.


(Signature of Applicant)
Daniel Flores

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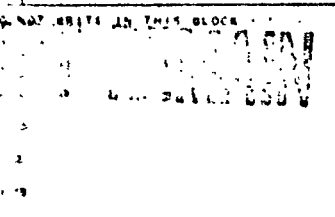
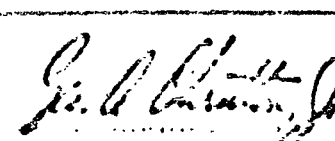
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BIOGRAPHIC PROFILE

SECRET

H a n d l e W i t h C a r e

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP				DATE	FILE NO.
TO: (CHECK)	<input checked="" type="checkbox"/>	CHIEF, CONTROL DIVISION, OP	460-48-0230.		
	<input type="checkbox"/>	CHIEF, CONTRACT PERSONNEL DIVISION, OP	EMPLOYEE NUMBER		
	<input checked="" type="checkbox"/>	CHIEF, (OPERATING COMPONENT FOR ACTION) ATTN: LA	ID CARD NUMBER		
REF. Form 1522 Dated 18 Aug 75				OFFICIAL COVER	<input checked="" type="checkbox"/> ESTABLISHED <input type="checkbox"/> CANCELLED
STATUS	<input checked="" type="checkbox"/>	STAFF	<input type="checkbox"/>	CONTRACT	UNIT
SUBJECT					
BLOCKS				DEPARTMENT OF STATE	
KEEP ON TOP OF FILE WHILE COVER IN EFFECT					
ESTABLISHMENT OF OFFICIAL COVER (BLOCK RECORDS)			CANCELLATION OF OFFICIAL COVER (UNBLOCK RECORDS)		
<input checked="" type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE <u>EOD</u>			EFFECTIVE DATE:		
<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR <u>TOY</u> OTHER (Specify)			SUBMIT FORM 3254 <u>W-2</u> TO BE ISSUED (HNB 20-7)		
<input checked="" type="checkbox"/> SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY <u>3</u> (HNB 20-7)			SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY <u>3</u> (HNB 20-7)		
<input checked="" type="checkbox"/> SUBMIT FORM 3254 <u>State</u> W-2 TO BE ISSUED. (HNB 20-11)			<input type="checkbox"/> SUBMIT FORM 2688 FOR HOSPITALIZATION CARD.		
<input checked="" type="checkbox"/> SUBMIT FORM 1522 FOR ANY CHANGE AFFECTING THIS COVER. (HR 240-20)			<input type="checkbox"/> SUBMIT FORM 2688 FOR HOSPITALIZATION CARD.		
<input checked="" type="checkbox"/> SUBMIT FORM 1521 FOR TRANSFERRING COVER RESPONSIBILITY. (HR 240-20)			<input type="checkbox"/> SUBMIT FORM 2688 FOR HOSPITALIZATION CARD.		
<input checked="" type="checkbox"/> EAA CATEGORY I <input type="checkbox"/> CATEGORY II <input checked="" type="checkbox"/>			<input type="checkbox"/> SUBMIT FORM 2688 FOR HOSPITALIZATION CARD.		
<input checked="" type="checkbox"/> SUBMIT FORM 2688 FOR <u>AGE</u> HOSPITALIZATION CARD			<input type="checkbox"/> SUBMIT FORM 2688 FOR HOSPITALIZATION CARD.		
AND/OR COVER HISTORY: 12 Mar 62-2 Dec 67-Hqs-Overt 3 Dec 67-9 Apr 69-Hqs-DAC 10 Apr 69-May 71-Leander-State-Int. May 71-Sep 71-H/L 6 Tdy-State-Int. Sep 71-Mar 74-Pern-State-Int. Mar 74-13 Sep 75-Hqs-State-Int. 14 Sep 75- Hqs-State-Nominal			DO NOT WRITE IN THIS BLOCK 		
DISTRIBUTION: COPY 1 - TO: [illegible] COPY 2 - OPERATIONAL COMPONENT COPY 3 - [illegible] COPY 4 - [illegible] COPY 5 - [illegible]					

FORM 1551 USE PREVIOUS EDITIONS

SECRET

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NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		DATE 23 APRIL 1974	FILE NO. 15675
TO: (Check) <input checked="" type="checkbox"/> CHIEF, CONTROL DIVISION, OP <input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION, OP <input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action) WH		CC NUMBER 460-486230 EMPLOYEE NUMBER 036130 ID CARD NUMBER	
ATTN: CHIEF SUPPORT STAFF		OFFICIAL COVER	<input checked="" type="checkbox"/> ESTABLISHED <input type="checkbox"/> DISCONTINUED
REF: FORM 2458, DATED 16 JANUARY 1974			
SUBJECT: DANIEL FLORES		UNIT: DEPARTMENT OF STATE	
KEEP ON TOP OF FILE WHILE COVER IN EFFECT			
<input checked="" type="checkbox"/> ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS <input checked="" type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE <u>EOD</u> <input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR <u>TDY</u> OTHER (Specify)		CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS EFFECTIVE DATE:	
<input checked="" type="checkbox"/> SUBMIT FORM 3254 (HNB 20-11) <input checked="" type="checkbox"/> SUBMIT FORM 1322 FOR CHANGE OF TELEPHONE LIMITATION CATEGORY TO CATEGORY <u>4</u> (HNB 20-7) <input checked="" type="checkbox"/> SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HNB 340-20)		SUBMIT FORM <u>3254</u> <u>28</u> <u>4-2</u> TO BE ISSUED. (HNB 20-11) SUBMIT FORM 1322 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY <u>4</u> (HNB 20-7) EAA: CATEGORY I CATEGORY II	
<input checked="" type="checkbox"/> EAA: CATEGORY I CATEGORY II <input checked="" type="checkbox"/>		SUBMIT FORM 2088 FOR <u>AGE</u> HOSPITALIZATION CARD REMARKS AND OR COVER HISTORY MAR 62-DEC 67-U.S.-OVERT DEC 67-APR 69-U.S.-DAC 10 APR 69-MAY 71-GUAYAQUIL-STATE-INTEGRATED MAY 71-MAR 74-PERU-STATE-INTEGRATED MAR 74-MOS-STATE-INTEGRATED	

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NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		DATE 27 November 1967	
TO: (CCN-1)	<input checked="" type="checkbox"/> CHIEF, PERSONNEL OPERATIONS DIVISION	FILE NUMBER 15675	
	<input checked="" type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION	EMPLOYEE NUMBER 036130	
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action)	ID CARD NUMBER 155/	
ATTN: Mr. Pavlyak		OFFICIAL COVER	<input checked="" type="checkbox"/> BACKSTOP ESTABLISHED
REF: Verbal Request			<input type="checkbox"/> DISCONTINUED
SUBJECT <input checked="" type="checkbox"/> FLORES, Daniel (NMI)		UNIT USAE, Geographical Evaluation & Analysis Gp	
KEEP ON TOP OF FILE WHILE COVER IN EFFECT			
<input checked="" type="checkbox"/> ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS (opmeco 20-800-11)		<input type="checkbox"/> CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS (opmeco 20-800-11)	
A. TEMPORARILY FOR _____ DAYS EFFECTIVE DATE COB _____		DATE (as of COB)	
B. CONTINUING XXXXXX 3 Dec 67			
<input checked="" type="checkbox"/>	SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HNB 20-7)	<input type="checkbox"/>	SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HNB 20-7)
<input checked="" type="checkbox"/>	ASCERTAIN THAT <u>ARMY</u> W-2 BEING ISSUED. (NR 20-661-1)	<input type="checkbox"/>	RETURN ALL OFFICIAL DOCUMENTATION TO CCS.
<input checked="" type="checkbox"/>	SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (NR 240-2a)	DO NOT WRITE IN THIS BLOCK - FOR CCS INTERNAL USE ONLY	
<input checked="" type="checkbox"/>	SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (NR 240-2a)		
<input type="checkbox"/>	CONCUR IN ISSUANCE		
<input type="checkbox"/>	AGE HOSPITALIZATION CARD		
<input type="checkbox"/>	NACS HOSPITALIZATION CARD		
REMARKS AND/OR COVER HISTORY Nar 62 - Dec 62 Overt			
EDP/nch			
DISTRIBUTION: 1 COPY TO POC 1 COPY TO OPERATING COMPONENT 1 COPY TO OCS 1 COPY TO OLT/OLST 1 COPY TO OPL/OLP 1 COPY TO OSA/OSA 1 COPY TO OSA/OSA		James H. [Signature]	

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ALL

L48 304 015

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5 U.S.C. AND EXECUTIVE ORDER 12165 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 07 OCTOBER 1979

NAME	ID NUMBER	ORG.	SCH-GR-STEP	NEW SALARY
FLCRES DANIEL	0036130	LA	GS 13 3	\$31,333

5656

1. SERIAL NO	2. NAME	3. ORGANIZATION	4. PLANS	5. (WOP HOURS)
036130	DANIEL FLCRES	LA		
6. OLD SALARY RATE		7. NEW SALARY RATE		8. TYPE ACTION
Grade	Step	Salary	Effective Date	WGI OSI ADJ.
GS	13	\$31,333	01/07/80	
CERTIFICATION AND AUTHENTICATION				
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE				
SIGNATURE			DATE	
<input type="checkbox"/> NO EXCESS (WOP) <input type="checkbox"/> <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> <input type="checkbox"/> (WOP) STATUS AT END OF WAITING PERIOD <input type="checkbox"/>				
EMPLOYER'S INITIALS: HEPFLCRES				
FORM 1071 5601 PAY CHANGE NOTIFICATION				

UUL

05/01/80

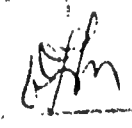
EFFECTIVE DATE OF PAY ADJUSTMENT: 01 OCTOBER 1978

.5678

1	SERIAL NO.	2	NAME	3	ORGANIZATION	4	TUNES	5	STEP	6	TEARS
	036130		FLORES DANILL		91 620						
6	OLD SALARY RATE			7	NEW SALARY RATE			8	STEP ADJUST.		
	Grade	Step	Salary		Grade	Step	Salary		EFFECTIVE DATE	WGS	QSI
	US 13	2	426.368		US 13	3	429.260		01/28/79		
CERTIFICATION AND AUTHENTICATION											
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE											
SIGNATURE								DATE			
[Signature]								1/17/79			
<input checked="" type="checkbox"/> NO EXCESS WORK <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> WORK STATUS AT END OF WAITING PERIOD											
APPROVED BY								[Signature]			
FORM 10-71 560F											
PAY CHANGE NOTIFICATION											

SEA 021078

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
036130		FLORES DANIEL									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE			5. CATEGORY OF EMPLOYMENT		
REASSIGNMENT						MO DA YR 02 11 78			REGULAR		
6. FUNDS		V TO V		V TO CF		7. TAN AND NSCA			8. CSC OR OTHER LEGAL AUTHORITY		
CF TO V		CF TO CF		8035 0990 0000			50 USC 403 J				
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDO/LA DIVISION FOREIGN FIELD MEXICO CITY, MEXICO STATION INDEPENDENT OPS BRANCH						MEXICO CITY, MEXICO					
11. POSITION TITLE						12. POSITION NUMBER			13. SERVICE DESIGNATION		
OPERATIONS OFFICER						GK76			DQG		
14. CLASSIFICATION SCHEDULE (GS, WP, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP			17. SALARY OR RATE		
GS				0136.01		13 2			26689		
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEREST CODE	24. MILEAGE CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI		
37	10	NUMERIC 51620	ALPHABETIC LA	45075		3	MO DA YR 08 04 35	MO DA YR	MO DA YR		
28. NTE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. Correction/Cancellation Data		33. SECURITY REQ NO		34. SEX
MO DA YR		CSC C/A P/A N/A	CODE		TYPE		MO DA YR		MO DA YR		
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP. DATE		38. CAREER CATEGORY		39. FECLT / HEALTH INSURANCE		40. SOCIAL SECURITY NO	
CODE		MO DA YR		MO DA YR		LAR REIV 28UV 1100		CODE		CODE	
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT CODE		43. FEDERAL TAX DATA			44. STATE TAX DATA		
CODE				CODE		FORM EXECUTED			STATE TAX DATA		
0. NO PREVIOUS SERVICE 1. NO BREAK IN SERVICE 2. BREAK IN SERVICE LESS THAN 3 YRS. 3. BREAK IN SERVICE MORE THAN 3 YRS.						CODE			CODE		
SIGNATURE OR OTHER AUTHENTICATION											
<div style="text-align: right;">  1978 </div>											

FORM 1150
5 Feb May 10 78Use Previous
Edition

SECRET

SEA

82 APR 1 C. BY 007822

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"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5 U.S.C. AND EXECUTIVE ORDER 12016 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 09 OCTOBER 1977

NAME	ID NUMBER	ORG.	SCH-GR-STEP	NEW SALARY
FLCRES DANIEL	0036130	LA	GS 13 1	\$26,022
				5927

CPD: 7 APR 77

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 036130		2. NAME (LAST FIRST MIDDLE) FLORES DANIEL															
3. NATURE OF PERSONNEL ACTION REMOVAL FROM PARTICIPATION IN CIA RETIREMENT AND DISABILITY SYSTEM				4. EFFECTIVE DATE MO DA YR 04 10 77		5. CATEGORY OF EMPLOYMENT REGULAR											
6. FUNDS V TO V CF TO V		V TO CF X CF TO CF		7. TAN AND NSCA 7135 4534 0000		8. CSC OR OTHER LEGAL AUTHORITY PL 88-643 SECT. 203											
9. ORGANIZATIONAL DESIGNATIONS DDO/LA DIVISION				10. LOCATION OF OFFICIAL STATION WASH., D.C.													
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION DQG											
14. CLASSIFICATION SCHEDULE (U.S. L.B. OR)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP 13		17. SALARY OR RATE											
18. REMARKS																	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																	
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING NUMERIC ALPHABETIC		22. STATION CODE		23. INTEGRAL CODE		24. HOURS CODE		25. DATE OF BIRTH MO DA YR		26. DATE OF GRADE MO DA YR		27. DATE OF LST MO DA YR	
28. NTE EXPIRES MO DA YR		29. SPECIAL REFERENCE		30. RETIREMENT DATA 1. CSM 2. CIA 3. FICA 4. NONE		31. SEPARATION DATA CODE		32. CORRECTION / CONCILIATION DATA TYPE MO DA YR		33. SECURITY REQ NO		34. SEX					
35. VET PREFERENCE CODE 0 NONE 1 5 PT 2 10 PT		36. SERV COMP DATE MO DA YR		37. LONG COMP DATE MO DA YR		38. CAREER CATEGORY CAS BPSV EPNVS DIMP		39. FEGLI / HEALTH INSURANCE CODE 0 / WAGER 1 YES		40. SOCIAL SECURITY NO							
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE LESS THAN 3 YRS. 3 BREAK IN SERVICE LONGER THAN 3 YRS.				42. LEAVE CAT CODE		43. FEDERAL TAX DATA FORM EMPLOYED 1 YES 2 NO		44. STATE TAX DATA FORM EMPLOYED 1 YES 2 NO									
SIGNATURE OR OTHER AUTHENTICATION																	

FORM 1130
5-6 May 70Use Previous
Edition

SECRET

REPRODUCTION BY OTHERS

PLF: 01 MAR 77

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION																			
1 SERIAL NUMBER		2 NAME (LAST-FIRST MIDDLE)																	
036130		FLORES DANIEL																	
3 NATURE OF PERSONNEL ACTION				4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT													
REASSIGNMENT				02 26 77		REGULAR													
6 FUNDS		V TO V		V TO CF		7 PAY AND NSCA		8 CSC OR OTHER LEGAL AUTHORITY											
CF TO V		X		CF TO CF		7135 4534 0000		50 USC 403 J											
9 ORGANIZATIONAL DESIGNATIONS						10 LOCATION OF OFFICIAL STATION													
DDO/LA DIVISION CUBA OPERATIONS GROUP EA AREA						WASH., D.C.													
11 POSITION TITLE						12 POSITION NUMBER		13 SERVICE DESIGNATION											
OPERATIONS OFFICER						F535		D2G											
14 CLASSIFICATION SCHEDULE (GS, LB, etc.)			15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE												
GS			0136.01		13 1		24308												
18 REMARKS																			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																			
19 ACTION CODE		20 EMPLOY CODE		21 OFFICE CODING		22 STATION CODE		23 INTEGRAL CODE		24 MONTHS CODE		25 DATE OF BIRTH		26 DATE OF GRADE		27 DATE OF LEI			
37		10		51500 LA		75013		1		08 04 35									
28 NTE EXPIRES		29 SPECIAL REFERENCE		30 RETIREMENT DATA		31 SEPARATION DATA CODE		32 CORRECTION/CANCELLATION DATA		33 SECURITY REQ NO		34 SEX							
MO DA YR				1 CSC 2 C.A. 3 N.A. 4 NONE		CODE		TIME MO DA YR		MOD DATA YR									
35 VET PREFERENCE		36 SERV COMP DATE		37 LONG COMP DATE		38 CAREER CATEGORY		39 REGU / HEALTH INSURANCE		40 SOCIAL SECURITY NO									
CODE		8 NONE 1 5 PT 2 10 PT		MO DA YR		MO DA YR		LAW BSA CODE CODE		0 WAIVER 1 YES		HEALTH INS CODE							
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE				42 LEAVE CAT CODE		43 FEDERAL TAX DATA				44 STATE TAX DATA									
CODE				8 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE LESS THAN 3 YRS 3 BREAK IN SERVICE MORE THAN 3 YRS		NOVEM EXEMPTED CODE		NO TAX EXEMPTIONS		NOVEM EXEMPTED		CLERK NO TAX EXEMPT		STATE CODE					
SIGNATURE OR OTHER AUTHENTICATION																			

PLF 1150
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SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)							
036130		FLORES DANIEL							
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
PROMOTION				01 30 77		REGULAR			
6. FUNDS		V TO V		V TO CF		7. PAY AND NSCA		8. CAC OR OTHER LEGAL AUTHORITY	
CF TO V		X		CF TO CF		7135 4534 0000		50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION					
DDO/LA DIVISION CUBA OPERATIONS GROUP WH AREA				WASH., D.C.					
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION			
OPERATIONS OFFICER				CG66		D3G			
14. CLASSIFICATION (SCHEDULE GS OR WS)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS		0136.01		13 1		24300			
18. REMARKS									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODE	22. STATION CODE	23. INTEREST CODE	24. HOURS CODE	25. DATE OF BIRTH	26. DATE OF DEATH	27. DATE OF IT	
22	10	51500	LA	75013		03 04 35	01 30 77	01 30 77	
28. DATE EXPIRES	29. SPECIAL REFERENCE	30. SEPARATION DATA	31. SEPARATION DATA CODE	32. CORRECTION CODE	33. SOCIAL SECURITY NO.	34. DATA			
35. PAY PRINTING	36. PAY DATA	37. PAY DATA	38. PAY DATA	39. PAY DATA	40. PAY DATA	41. PAY DATA	42. PAY DATA	43. PAY DATA	44. PAY DATA
45. PAY DATA	46. PAY DATA	47. PAY DATA	48. PAY DATA	49. PAY DATA	50. PAY DATA	51. PAY DATA	52. PAY DATA	53. PAY DATA	54. PAY DATA
SIGNATURE OF OFFICE AUTHORITY									

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24-400 11-7624-400 11-76
24-400 11-76

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EFFECTIVE DATE OF PAY ADJUSTMENTS IS OCTOBER 1970

001111 CATH. FILE: CF-5166
020130 17 DEC 61 05 12 Z

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0010004

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SECRET
(When Filled In)

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NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 33613		2. NAME (LAST FIRST MIDDLE) FLORES DANIEL	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT - CHANGE OF FUNCTIONAL CATEGORY		4. EFFECTIVE DATE MO DA YR JG 21 76	
5. CATEGORY OF EMPLOYMENT REGULAR		6. CSE OR OTHER LEGAL AUTHORITY 50 USC 403 J	
7. TAN AND NSCA T175 3012 1976	8. CSE OR OTHER LEGAL AUTHORITY 50 USC 403 J		
9. ORGANIZATIONAL DESIGNATIONS DDA/OTR FUNCTIONAL TRAINING DIVISION OPERATIONS TRAINING BRANCH		10. LOCATION OF OFFICIAL STATION WASH., D.C.	
11. POSITION TITLE INSTRUCTOR OPS		12. POSITION NUMBER BD33	
13. SERVICE DESIGNATION DOG		14. CLASSIFICATION SCHEDULE (OS, IS, OR) GS	
15. OCCUPATIONAL SERIES 1712.32		16. GRADE AND STEP 12 3	
17. SALARY OR RATE 25078		18. REMARKS	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE 37		20. EMPLOY CODE 12	
21. OFFICE CODING NUMERIC ALPHABETIC 175 J OTR		22. STATION CODE 75 J13	
23. INTEGRITY CODE 1		24. DATE OF BIRTH MO DA YR J8 J4 35	
25. DATE OF GRADE MO DA YR		26. DATE OF LET MO DA YR	
27. DATE OF LET MO DA YR		28. SECURITY REQ NO.	
29. NTE EXPIRES MO DA YR		30. SPECIAL REFERENCE CSC C/A IV A N/A	
31. VET PREFERENCE CODE 1 NO 2 YES		32. SERV COMP DATE MO DA YR	
33. LONG COMP DATE MO DA YR		34. CARTER CATEGORY CODE 1 YES 2 NO	
35. FEAT / HEALTH INSURANCE CODE 1 YES 2 NO		36. SOCIAL SECURITY NO.	
37. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 1 NO PREVIOUS SERVICE 2 NO BRAG IN SERVICE 3 BRAG IN SERVICE LESS THAN 3 YRS. 4 BRAG IN SERVICE MORE THAN 3 YRS.		38. LEAVE CAT CODE	
39. FEDERAL TAX DATA FORM EMPLOYED 1 YES 2 NO		40. STATE TAX DATA CODE 1 YES 2 NO	
SIGNATURE OR OTHER AUTHENTICATION			
FROM: LA			

FORM 1130
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FORM 1130-1 (1-76)

00000

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11883 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 12 OCTOBER 1975

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51	500	CF GS 12 2	\$20,032

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11811 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 OCTOBER 1974

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51	500	CF GS 12 1	\$18,463

FOR PURPOSES OF THE FAIR LABOR STANDARDS ACT, AS AMENDED,
YOU ARE DESIGNATED EXEMPT.

EFFECTIVE DATE OF DESIGNATION: 31 MAY 1974.

FLORES DANIEL

036130

41351084

1 SERIAL NO		2 NAME		3 ORGANIZATION		4 FUNDS		5 LWOP HOURS	
036130		FLORES DANIEL		51 500		CF			
6 OLD SALARY RATE				7 NEW SALARY RATE				8 TYPE ACTION	
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ
GS 12	2	20032	11/24/74	GS 12	3	20678	11/23/75		
		119,076				119,693			
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE									
SIGNATURE						DATE			
<i>[Signature]</i>						11/23/75			
<input type="checkbox"/> NO EXCESS LWOP									
<input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD									
<input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERK'S INITIALS						BY			
[Initials]						<i>[Signature]</i>			
FORM 7-60 500E						PAY CHANGE NOTIFICATION			

FORM 10 SEP 75

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION																	
1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)															
13011		FLORES DANIEL															
3 NATURE OF PERSONNEL ACTION						4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT									
CONVERSION FROM FSR STATUS						MO DA YR 10 14 75		REGULAR									
6 FUNDS		V TO V		V TO CF		7 FAN AND NSCA		8 CSC OR OTHER LEGAL AUTHORITY									
CF TO V		X		CF TO CF		6155 1574		51 USC 403 J									
9 ORGANIZATIONAL DESIGNATIONS						10 LOCATION OF OFFICIAL STATION											
DOO/LA DIVISION CUSA OPERATIONS GROUP OPS BRANCH						WASH., D.C.											
11 POSITION TITLE						12 POSITION NUMBER		13 SERVICE DESIGNATION									
OPERATIONS OFFICER						CQ05		DQB									
14 CLASSIFICATION SCHEDULE (GS, LB, etc.)				15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE									
GS				6136.01		12 2		19070									
18 REMARKS																	
WASH., D.C.																	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																	
19 ACTION CODE		20 EMPLOY CODE		21 OFFICE CODING		22 STATION CODE		23 INTEREST CODE		24 HOURS CODE		25 DATE OF BIRTH		26 DATE OF GRADE		27 DATE OF LEI	
56		1		5157 LA		7513				1		MO DA YR 10 14 75		MO DA YR		MO DA YR	
28 NTE EXPIRES		29 SPECIAL REFERENCE		30 RETIREMENT DATA		31 SEPARATION DATA CODE		32 CORRECTION / CANCELLATION DATA		33 SECURITY REG NO		34 SER					
MO DA YR				1 CSC 2 CAP 3 FCA 4 NONE		CODE		TYPE MO DA YR		EOD DATA							
35 VET PREFERENCE		36 SERV COMP DATE		37 LONG COMP DATE		38 CAREER CATEGORY		39 FEGLI / HEALTH INSURANCE		40 SOCIAL SECURITY NO							
CODE		MO DA YR		MO DA YR		CAR ESW FROM EMP		CODE CODE 9 WAIVER 1 YES		HEALTH INS CODE							
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE				42 LEAVE CAT CODE		43 FEDERAL TAX DATA				44 STATE TAX DATA							
CODE				CODE		FORM EXECUTED 1 YES 2 NO				FORM EXECUTED 1 YES 2 NO							
5 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (MORE THAN 3 YRS) 3 BREAK IN SERVICE (MORE THAN 5 YRS)						MO TAX EXEMPTIONS				MO TAX EXEMPTIONS							
						MO TAX EXEMPTIONS				MO TAX EXEMPTIONS							
SIGNATURE OR OTHER AUTHENTICATION																	
<div style="float: right; border: 1px solid black; padding: 5px; text-align: center;"> POSTED 19 SEP 75 <i>BL</i> </div>																	

FORM 1150
9-72 May 9-73Use Previous
Edition

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E 2 IMPROST CL BY 607627

14-011

LT-42

1 SERIAL NO		2 NAME		3 ORGANIZATION		4 FUNDS		5 LWOP HOURS	
030130		FLORES DANIEL		SI 500		CF			
6 OLD SALARY RATE				7 NEW SALARY RATE				8 TYPE ACTION	
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	EFFECTIVE DATE	WGI	QSI
GS 12	1	18,463	11/25/73	GS 12	2	19,078	11/24/74		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE									
SIGNATURE <i>Norton D. Sandy</i>						DATE 23 Sept 74			
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERKS INITIALS <i>4-28</i> <i>[Signature]</i>									
FORM 10-73 560E Use previous editions PAY CHANGE NOTIFICATION									

LMP: 27 SEPT 74

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)									
036130		FLORES DANIEL									
3 NATURE OF PERSONNEL ACTION						4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT			
REASSIGNMENT						09 15 74		REGULAR			
6 FUNDS		V TO V		V TO CF		7 FAN AND NSCA		8 CSC OR OTHER LEGAL AUTHORITY			
CF TO V		X		CF TO CF		5135 4534 0000		50 USC 403 J			
9 ORGANIZATIONAL DESIGNATIONS						10 LOCATION OF OFFICIAL STATION					
DDO/WH DIVISION WH/COG OPS BRANCH						WASH., D.C.					
11 POSITION TITLE						12 POSITION NUMBER		13 SERVICE DESIGNATION			
POL OFF ATTACHE OPS OFFICER						1159		DQB			
14 CLASSIFICATION SCHEDULE (GS, LB, etc.)				15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE			
FSR GS				0136.01		06 1 12 1		13863 17497			
18 REMARKS WASH., D.C.											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19 ACTION CODE		20 EMPLOY CODE		21 OFFICE CODING		22 STATION CODE		23 INTEGRITY CODE		24 HOURS CODE	
37		10		NUMBER ALPHABETIC 51500 WH		75013		S		1	
25 DATE OF BIRTH		26 DATE OF GRADE		27 DATE OF LST		28 DATE OF RETIREMENT		29 SPECIAL REFERENCE		30 RETIREMENT DATA	
08 04 35		00 00 00		00 00 00		00 00 00		00 00 00		00 00 00	
31 VET PREFERENCE		32 SERV COMP DATE		33 LONG COMP DATE		34 CAREER CATEGORY		35 PEGU / HEALTH INSURANCE		36 SECURITY REQ NO	
00 00 00		00 00 00		00 00 00		00 00 00		00 00 00		00 00 00	
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE				42 LEAVE CAT CODE		43 FEDERAL TAX DATA				44 STATE TAX DATA	
00 00 00				00 00 00		00 00 00				00 00 00	
SIGNATURE OR OTHER AUTHENTICATION											
POSTED JK 9/27/74											

(When Filled In)

DATE 19 APR 76

NOTIFICATION OF PERSONNEL ACTION

[illegible]

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Wen Wen

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2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118 119 120 121 122 123 124 125 126 127 128 129 130 131 132 133 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170 171 172 173 174 175 176 177 178 179 180 181 182 183 184 185 186 187 188 189 190 191 192 193 194 195 196 197 198 199 200 201 202 203 204 205 206 207 208 209 210 211 212 213 214 215 216 217 218 219 220 221 222 223 224 225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243 244 245 246 247 248 249 250 251 252 253 254 255 256 257 258 259 260 261 262 263 264 265 266 267 268 269 270 271 272 273 274 275 276 277 278 279 280 281 282 283 284 285 286 287 288 289 290 291 292 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 310 311 312 313 314 315 316 317 318 319 320 321 322 323 324 325 326 327 328 329 330 331 332 333 334 335 336 337 338 339 340 341 342 343 344 345 346 347 348 349 350 351 352 353 354 355 356 357 358 359 360 361 362 363 364 365 366 367 368 369 370 371 372 373 374 375 376 377 378 379 380 381 382 383 384 385 386 387 388 389 390 391 392 393 394 395 396 397 398 399 400 401 402 403 404 405 406 407 408 409 410 411 412 413 414 415 416 417 418 419 420 421 422 423 424 425 426 427 428 429 430 431 432 433 434 435 436 437 438 439 440 441 442 443 444 445 446 447 448 449 450 451 452 453 454 455 456 457 458 459 460 461 462 463 464 465 466 467 468 469 470 471 472 473 474 475 476 477 478 479 480 481 482 483 484 485 486 487 488 489 490 491 492 493 494 495 496 497 498 499 500 501 502 503 504 505 506 507 508 509 510 511 512 513 514 515 516 517 518 519 520 521 522 523 524 525 526 527 528 529 530 531 532 533 534 535 536 537 538 539 540 541 542 543 544 545 546 547 548 549 550 551 552 553 554 555 556 557 558 559 560 561 562 563 564 565 566 567 568 569 570 571 572 573 574 575 576 577 578 579 580 581 582 583 584 585 586 587 588 589 590 591 592 593 594 595 596 597 598 599 600 601 602 603 604 605 606 607 608 609 610 611 612 613 614 615 616 617 618 619 620 621 622 623 624 625 626 627 628 629 630 631 632 633 634 635 636 637 638 639 640 641 642 643 644 645 646 647 648 649 650 651 652 653 654 655 656 657 658 659 660 661 662 663 664 665 666 667 668 669 670 671 672 673 674 675 676 677 678 679 680 681 682 683 684 685 686 687 688 689 690 691 692 693 694 695 696 697 698 699 700 701 702 703 704 705 706 707 708 709 710 711 712 713 714 715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730 731 732 733 734 735 736 737 738 739 740 741 742 743 744 745 746 747 748 749 750 751 752 753 754 755 756 757 758 759 760 761 762 763 764 765 766 767 768 769 770 771 772 773 774 775 776 777 778 779 780 781 782 783 784 785 786 787 788 789 790 791 792 793 794 795 796 797 798 799 800 801 802 803 804 805 806 807 808 809 810 811 812 813 814 815 816 817 818 819 820 821 822 823 824 825 826 827 828 829 830 831 832 833 834 835 836 837 838 839 840 841 842 843 844 845 846 847 848 849 850 851 852 853 854 855 856 857 858 859 860 861 862 863 864 865 866 867 868 869 870 871 872 873 874 875 876 877 878 879 880 881 882 883 884 885 886 887 888 889 890 891 892 893 894 895 896 897 898 899 900 901 902 903 904 905 906 907 908 909 910 911 912 913 914 915 916 917 918 919 920 921 922 923 924 925 926 927 928 929 930 931 932 933 934 935 936 937 938 939 940 941 942 943 944 945 946 947 948 949 950 951 952 953 954 955 956 957 958 959 960 961 962 963 964 965 966 967 968 969 970 971 972 973 974 975 976 977 978 979 980 981 982 983 984 985 986 987 988 989 990 991 992 993 994 995 996 997 998 999 1000 1001 1002 1003 1004 1005 1006 1007 1008 1009 1010 1011 1012 1013 1014 1015 1016 1017 1018 1019 1020 1021 1022 1023 1024 1025 1026 1027 1028 1029 1030 1031 1032 1033 1034 1035 1036 1037 1038 1039 1040 104

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SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

DDF

1 SERIAL NUMBER 030130		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL	
3 NATURE OF PERSONNEL ACTION PROMOTION		4 EFFECTIVE DATE 11 25 73	5 CATEGORY OF EMPLOYMENT REGULAR
6 FUNDS	V TO V CF TO V	V TO CF CF TO CF	7 FAN AND NSCA 4135 1084 0000
		8 CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J	
9 ORGANIZATIONAL DESIGNATIONS DDO/WH DIVISION FOREIGN FIELD BRANCH 3-LIMA, PERU STATION		10 LOCATION OF OFFICIAL STATION LIMA, PERU	
11 POSITION TITLE POL OFFICER ATTACHE OPS OFFICER		12 POSITION NUMBER 0136	13 SERVICE DESIGNATION D
14 CLASSIFICATION SCHEDULE (OS, LB, etc.) FSR GS	15 OCCUPATIONAL SERIES 6136.01	16 GRADE AND STEP 06 1 12 1	17 SALARY OR RATE 13263 17427
18 REMARKS LIMA, PERU HOME CASE: WH			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19 ACTION CODE 22	20 EMPLOYER CODE 10	21 OFFICE CODING 51760	22 STATION CODE 57085
23 INTEGRITY CODE S	24 HOURS CODE 3	25 DATE OF BIRTH 08 04 35	26 DATE OF GRADE 11 25 73
27 DATE OF LEI 11 25 73	28 INT EXPRESS NO DA YES	29 SPECIAL REFERENCE 1 FUL 2 C.A. 3 P.S.A. 4 Not Ind	30 RETIREMENT DATA CODE
31 SEPARATION DATA CODE	32 CORRECTION/CONCILIATION DATA TIME NO DA YES	33 SECURITY REQ NO	34 SER
35 VET PREFERENCE CODE 1 NO 2 YES	36 SERV COMP DATE NO DA YES	37 LONG COMP DATE NO DA YES	38 CAREER CATEGORY FAB BSA CODE CODE 1 YES 2 NO
39 REGI HEALTH INSURANCE CODE 1 YES 2 NO	40 SOCIAL SECURITY NO	41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 1 NO 2 YES 3 YES 4 YES 5 YES 6 YES 7 YES 8 YES 9 YES 10 YES	
42 LEA-E CAT CODE	43 FEDERAL TAX DATA CODE 1 YES 2 NO 3 YES 4 NO 5 YES 6 NO 7 YES 8 NO 9 YES 10 NO	44 STATE TAX DATA CODE 1 YES 2 NO 3 YES 4 NO 5 YES 6 NO 7 YES 8 NO 9 YES 10 NO	45 STATE CODE
SIGNATURE OF OTHER AUTHENTICATION 11/15/73			

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1-73 12/12Via Previous
Edition

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6-2 (Rev. 8-66) OF 10

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14-00000

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF
TITLE 5, U.S.C. AND EXECUTIVE ORDER 11739 PURSUANT TO AUTHORITY OF DCI
AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE
DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 OCTOBER 1973

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51	760	CF GS 11 4	\$16,138

27

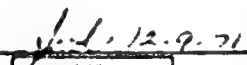
"PAY ADJUSTMENT IN ACCORDANCE WITH 5 U.S.C. 5305 AND EXECUTIVE ORDER
11691 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 07 JANUARY 1973

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51	760	CF GS 11 4	\$15,394

BS: 8 DEC 71

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
036130		FLORES DANIEL									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE			5. CATEGORY OF EMPLOYMENT		
PROMOTION						11 28 71			REGULAR		
6. FUNDS		V TO V		V TO CP		7. Financial Analysis No. Chargeable			8. CSC OR OTHER LEGAL AUTHORITY		
CP TO V		X		CP TO CP		2135 1084 0000			50 USC 403 J		
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DUP/WH DIVISION FOREIGN FIELD BRANCH 3, LIMA, PERU STATION						LIMA, PERU					
11. POSITION TITLE						12. POSITION NUMBER			13. SERVICE DESIGNATION		
POL OFFICER ATTACHE OPS OFFICER						0136			D		
14. CLASSIFICATION SCHEDULE (104, 105, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP			17. SALARY OR RATE		
FSR GS				0136.01		07 1 11 3			10014 13457		
18. REMARKS											
LIMA, PERU											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL:											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTERIOR CODE	24. PAYMENT CODE	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI
22	10	51760 WH		57085	S	3	08 04 35		11 28 71		11 28 71
28. PTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. Correction / Cancellation Data		33. SECURITY REQ NO	
NO DA YR				1. C/P 2. T/A 3. W/S		TYPE		NO DA YR		100 DATA	
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. PEGU / HEALTH INSURANCE		40. SOCIAL SECURITY NO	
CODE 0. NONE 1. 5 YR 2. 10 YR		NO DA YR		NO DA YR		CAR SERV NOV TEAP		CODE 0. NONE 1. YES		HEALTH INS CODE	
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEA-E CAT CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA	
CODE 0. NO PREVIOUS SERVICE 1. NO BREAK IN SERVICE 2. BREAK IN SERVICE LESS THAN 3 YRS 3. BREAK IN SERVICE MORE THAN 3 YRS				NO		FORM EXECUTED 1. YES 2. NO				FORM EXECUTED 1. YES 2. NO	
SIGNATURE OR OTHER AUTHENTICATION											
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FORM 1150
Rev 6-71Use Previous
Edition

SECRET

(When Filled In)

WEB: 29 SEPT 71

SECRET

(When Filled In)

NOTIFICATION OF PERSONNEL ACTION																	
ODF																	
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)															
036130		FLORES DANIEL															
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT											
REASSIGNMENT				09 19 71		REGULAR											
6. FUNDS		V TO V		V TO CF		7. Financial Analysis No. Chargeable		8. CSC OR OTHER LEGAL AUTHORITY									
CF TO V		X		CF TO CF		2135 1084 0000		50 USC 403 J									
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION											
DDP/WH FOREIGN FIELD BRANCH 3 LIMA, PERU STATION						LIMA, PERU											
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION									
POLITICAL OFFICER ATTACHE OPS OFFICER						0136		D									
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE									
FSR GS				0136.01		07 1 10 3		10014 12285									
18. REMARKS																	
GUAYAQUIL, ECUADOR																	
HOME BASE: WH																	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																	
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INQUIRY CODE		24. MONTH CODE		25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI	
37		10		51700 WH		57085		S		3		08 04 35					
28. INT. EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. Cancellation Cancellation Data		33. SECURITY REG NO		34. SER					
MO DA YR XX XX XX				1. CSC 2. CIA 3. FICA 4. NCHS		COIN		TYPE		MO DA YR		IOD DATA					
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. FEGLI - HEALTH INSURANCE		40. SOCIAL SECURITY NO							
CODE 1. 3 PT 2. 10 PT		MO DA YR		MO DA YR		CAREER PROV TEMP		LIFE 1. YES 2. NO		HEALTH INS CODE							
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE						42. LEAVE CAT CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA							
CODE 0. NO PREVIOUS SERVICE 1. NO BREAK IN SERVICE 2. BREAK IN SERVICE (LESS THAN 3 YRS) 3. BREAK IN SERVICE (MORE THAN 3 YRS)						45. FORM EXECUTED 1. YES 2. NO		NO TAX EXEMPTIONS		46. FORM EXECUTED 1. YES 2. NO		CODE NO TAX EXEMPT		STATE CODE			
SIGNATURE OR OTHER AUTHENTICATION																	
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FORM 1150
5-68

Use Previous Edition

SECRET

BS

(Printed Name of Official)
 AUTHENTICATION

Jul 19

1. SERIAL NO.		2. NAME		3. ORGANIZATION		4. FUNDS		5. LWOP HOURS	
036130		FLORES DANIEL		51 700		CF			
6. OLD SALARY RATE				7. NEW SALARY RATE				8. TYPE ACTION	
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ.
GS 10	2	\$11,901	07/26/70	GS 10	3	\$12,295	07/25/71		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE				DATE					
Richard L. Conolly				6 May 1971					
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERKS INITIALS				AUDITED BY					
R. L. Conolly				Jed					
FORM 7-65 560 E		Use previous editions		PAY CHANGE NOTIFICATION				(4-51)	

545

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-656 AND EXECUTIVE ORDER 11576 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 JANUARY 1971

NAME	SERIAL	ORGN.	FUNDS	GR+STEP	NEW SALARY
FLORES DANIEL	036130	51	700	CF GS 10 2	\$11,901

SECRET

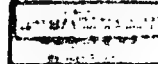
(When Filled In)

BSJ: 10 AUG 70


NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
036136		FLORES DANIEL									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
PROMOTION				07 29 70		REGULAR					
6. FUNDS		V TO V		V TO CF		7. Financial Analysis No Chargeable		8. CSC OR OTHER LEGAL AUTHORITY			
CF TO V		X		CF TO CF		1135 0884 0000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP/WH FOREIGN FIELD BRANCH 3 QUITO, ECUADOR STATION GUAYAQUIL, ECUADOR BASE						GUAYAQUIL, ECUADOR					
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION					
POL OFFICER OPS OFFICER				0376		D					
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
FSR GS				0136.01		07 1 10 2		9450 11231			
18. REMARKS											
GUAYAQUIL, ECUADOR.											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGRAL CODE		24. MAJOR CODE	
22		10		51700 WH		19559		S		3	
25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI		28. DATE OF BIRTH		29. DATE OF GRADE		30. DATE OF LEI	
03 04 35		07 26 70		07 26 70		03 04 35		07 26 70		07 26 70	
31. NTE EXPIRES		32. SPECIAL REFERENCE		33. RETIREMENT DATA		34. SEPARATION DATA CODE		35. CORRECTION / CANCELLATION DATA		36. SECURITY REQ NO	
07 25 72		81		CODE		CODE		CODE		CODE	
37. VET PREFERENCE		38. SERV COMP DATE		39. LONG COMP DATE		40. CAREER CATEGORY		41. FEELI: HEALTH INSURANCE		42. SOCIAL SECURITY NO	
CODE		CODE		CODE		CODE		CODE		CODE	
43. PREVIOUS CIVILIAN GOVERNMENT SERVICE		44. LEAVE CAT CODE		45. FEDERAL TAX DATA		46. STATE TAX DATA		47. SOCIAL SECURITY NO		48. SOCIAL SECURITY NO	
CODE		CODE		CODE		CODE		CODE		CODE	
49. SIGNATURE OR OTHER AUTHENTICATION		50. SIGNATURE OR OTHER AUTHENTICATION		51. SIGNATURE OR OTHER AUTHENTICATION		52. SIGNATURE OR OTHER AUTHENTICATION		53. SIGNATURE OR OTHER AUTHENTICATION		54. SIGNATURE OR OTHER AUTHENTICATION	
55. SIGNATURE OR OTHER AUTHENTICATION		56. SIGNATURE OR OTHER AUTHENTICATION		57. SIGNATURE OR OTHER AUTHENTICATION		58. SIGNATURE OR OTHER AUTHENTICATION		59. SIGNATURE OR OTHER AUTHENTICATION		60. SIGNATURE OR OTHER AUTHENTICATION	

SECRET

POSTED



G55

1. SERIAL NO.		2. NAME		3. ORGANIZATION		4. FUNDS		5. LWOP HOURS	
036130		FLURES DANIEL		91 700		CF			
6. OLD SALARY RATE				7. NEW SALARY RATE				8. TYPE ACTION	
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ.
GS 09	2	\$ 9,631	04/06/69	GS 09	3	\$ 9,942	04/03/70		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE						DATE			
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERK'S INITIALS								AUDITED BY	
FORM 7-60 560 E		Use previous editions		PAY CHANGE NOTIFICATION				(4.91)	

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"PAY ADJUSTMENT IN ACCORDANCE WITH SECTION 212 OF PL 90-208 AND EXECUTIVE ORDER 11474 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 JULY 1969

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51	700	CF GS 09 2	\$ 9,631

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-231 AND EXECUTIVE ORDER 11524 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 29 DECEMBER 1969

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51	700	CF GS 09 2	\$10,210

SECRET

(When Filled In)

JLB: 22 APR 69

NOTIFICATION OF PERSONNEL ACTION

CCF

1. SERIAL NUMBER 036130		2. NAME (LAST FIRST MIDDLE) FLORES DANIEL	
3. NATURE OF PERSONNEL ACTION PROMOTION, TRANSFER TO CONFIDENTIAL FUNDS AND CHANGE OF SERVICE DESIGNATION		4. EFFECTIVE DATE 04/06/69	5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS V TO V CF TO V	7. TO CF X CF TO CF	8. CAC OR OTHER LEGAL AUTHORITY 50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 3 QUITO, ECUADOR STATION GUAYAQUIL, ECUADOR BASE		10. LOCATION OF OFFICIAL STATION GUAYAQUIL, ECUADOR	
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 0375	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS 18 AM) GS	15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 03 2	17. SALARY OR RATE 8744
18. REMARKS TO BE INTEGRATED			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE 20	20. EMPLOY CODE 10	21. OFFICE CODES NUMBER 51700 SYMBOLIC WH	22. STATUS CODE 19555
23. DATE OF BIRTH 08/04/35	24. DATE OF GRADE 04/06/69	25. DATE OF LEI 04/06/69	26. SECURITY REQ NO 34 SER
27. PTE EMPLOY NO DA 10	28. SPECIAL REFERENCE 1. CIV 2. SUB 3. PIA 4. NO DA	29. SEPARATION DATA CODE 1. YES 2. NO	30. SECURITY / COMPLETION DATE 1. YES 2. NO
31. VET PREFERENCE 1. YES 2. NO	32. SERV COMP DATE NO DA 10	33. LONG COMP DATE NO DA 10	34. CAREER CATEGORY 1. YES 2. NO
35. PREVIOUS OFFICIAL GOVERNMENT SERVICE 1. NO 2. YES (DATE OF SERVICE) 3. YES (DATE OF SERVICE) AFTER 10/1/68 4. YES (DATE OF SERVICE) AFTER 10/1/68	36. STATE TAX DATA 1. YES 2. NO	37. FEDERAL TAX DATA 1. YES 2. NO	38. SOCIAL SECURITY NO 1. YES 2. NO
SIGNATURE OF OTHER AUTHENTICATION			

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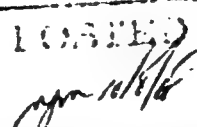
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1-0011-000
1-00

JLU: 7 OCT 68

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
036130		FLORES DANIEL									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
REASSIGNMENT						10 06 68		REGULAR			
6. FUNDS		X		V TO V		V TO CF		7. Financial Analysis Pkg. Chargeable		8. CSC OR OTHER LEGAL AUTHORITY	
		CF TO V		CF TO CF		9235 0620 0000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP/WH BRANCH 4 URUGUAY/PARAGUAY SECTION						WASH., D.C.					
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION			
OPS OFFICER						1441		SJ			
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS				0136.01		08 2		7956			
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGRITY CODE		24. MAJOR CODE	
37		10		51450 WH		75013				25. DATE OF BIRTH	
										08 04 35	
26. NTE EXPIRY		27. SPECIAL REFERENCE		28. RETIREMENT DATA		29. SEPARATION DATA CODE		30. CORRECTION / Cancellation Date		31. SECURITY REG NO	
NO DA YR				1. FV 2. CA 3. FV 4. NONE				MO DA YR		32. SEX	
										33. SOCIAL SECURITY NO	
34. VET PREFERENCE		35. SERV COMP DATE		36. LONG COMP DATE		37. CAREER CATEGORY		38. REGUL / HEALTH INSURANCE		39. SOCIAL SECURITY NO	
CODE		MO DA YR		MO DA YR		CAR 011 PROF 001		CI OR 0 111 HEALTH INS CODE			
1. NONE 2. 1 PT 3. 16 PT											
40. PREVIOUS CIVILIAN GOVERNMENT SERVICE				41. LEAVE CAT CODE		42. FEDERAL TAX DATA				43. STATE TAX DATA	
CODE						NO TAX EXEMPTIONS				NO TAX EXEMPTIONS	
1. NO PREVIOUS SERVICE 2. NO BREAK IN SERVICE 3. BREAK IN SERVICE LESS THAN 3 YRS 4. BREAK IN SERVICE MORE THAN 3 YRS						1. YES 2. NO				1. YES 2. NO	
SIGNATURE OR OTHER AUTHENTICATION											
FROM CTP											
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FORM 1150
1-68Use Previous
Edition

SECRET

SF.

Excluded from automatic
downgrading and
declassification

(When Filled In)

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTIONS 212 AND 216 OF PL 90-206 AND EXECUTIVE ORDER 11413 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 JULY 1968

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
FLORES DANIEL	036130	28	300	V GS 08 2	\$ 7,630	\$ 7,956

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 90-206 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962,"

EFFECTIVE DATE OF PAY ADJUSTMENT: 8 OCTOBER 1967

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
FLORES DANIEL	036130	28	300	V GS 06 3	\$ 6,263	\$ 6,547

JLB: 24 JUN 68

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
036130		FLORES DANIEL									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
PROMOTION						MO DA YR 06 16 68		REGULAR			
6. FUNDS		7. V TO V		8. V TO CF		9. Financial Analysis No. Chargeable		10. CSC OR OTHER LEGAL AUTHORITY			
X		CF TO V		CF TO CF		8275 2100 0000		50 USC 403 J			
11. ORGANIZATIONAL DESIGNATIONS						12. LOCATION OF OFFICIAL STATION					
DDS/OTR CAREER TRAINING PROGRAM						WASH., D.C.					
13. POSITION TITLE						14. POSITION NUMBER		15. SERVICE DESIGNATION			
CAREER TRAINEE						0745		SJ			
16. CLASSIFICATION SCHEDULE (GS, LB, etc.)			17. OCCUPATIONAL SERIES			18. GRADE AND STEP			19. SALARY OR RATE		
GS			0090.01			GS 2			7630		
20. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
21. ACTION CODE		22. EMPLOY CODE		23. OFFICE CODING		24. STATION CODE		25. INTEGRAL CODE		26. MONTH CODE	
22		10		268000 CTP		75013				1	
27. DATE OF BIRTH		28. DATE OF GRADE		29. DATE OF 1E1		30. DATE OF BIRTH		31. DATE OF GRADE		32. DATE OF 1E1	
MO DA YR		MO DA YR		MO DA YR		MO DA YR		MO DA YR		MO DA YR	
06 04 35		06 16 68		06 16 68		06 16 68		06 16 68		06 16 68	
33. INT. EXPIRES		34. SPECIAL REFERENCE		35. RETIREMENT DATA		36. SEPARATION DATA CODE		37. Correction - Cancellation Data		38. SECURITY REQ NO	
MO DA YR				1. CSC 2. CIA 3. PCA 4. NCMH		CODE		TYPE MO DA YR		34. SEA	
39. VET PREFERENCE		40. SERV COMP DATE		41. LONG COMP DATE		42. CAREER CATEGORY		43. FEGLI / HEALTH INSURANCE		44. SOCIAL SECURITY NO.	
CODE		MO DA YR		MO DA YR		CODE		CODE		CODE	
1. NONE 2. 5 PT 3. 10 PT						CAREER CATEGORY		FEGLI / HEALTH INSURANCE		CODE	
45. PREVIOUS CIVILIAN GOVERNMENT SERVICE		46. LEAVE CAT CODE		47. FEDERAL TAX DATA		48. STATE TAX DATA		49. FEDERAL TAX DATA		50. STATE TAX DATA	
CODE		CODE		CODE		CODE		CODE		CODE	
1. NO PREVIOUS SERVICE 2. NO BREAK IN SERVICE 3. BREAK IN SERVICE LESS THAN 3 YRS. 4. BREAK IN SERVICE MORE THAN 3 YRS.						FORM EXECUTED 1. YES 2. NO		FORM EXECUTED 1. YES 2. NO		FORM EXECUTED 1. YES 2. NO	
SIGNATURE OR OTHER AUTHENTICATION											

POSTED
PC
6-24-68

FORM 54a 1150 May 10-67

Use Previous Edition

SECRET

JLB

GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

SECRET
(When Filled In)

FVS: 15 DEC 67

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 030130		2. NAME (LAST FIRST MIDDLE) FLORES DANIEL	
3. NATURE OF PERSONNEL ACTION PROMOTION AND CHANGE OF SERVICE DESIGNATION			4. EFFECTIVE DATE NO. DA. YR. 12 17 67
5. CATEGORY OF EMPLOYMENT REGULAR			6. FUNDS X V TO V CF TO V
7. Financial Analysis No. Chargeable 6275 2100 0000			8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J
9. ORGANIZATIONAL DESIGNATIONS JCS/CTR CAREER TRAINING PROGRAM		10. LOCATION OF OFFICIAL STATION WASH., D.C.	
11. POSITION TITLE CAREER TRAINEE		12. POSITION NUMBER 0748	13. SERVICE DESIGNATION SJ
14. CLASSIFICATION SCHEDULE (GS, LO, etc.) GS	15. OCCUPATIONAL SERIES 0050.01	16. GRADE AND STEP 07-2	17. SAL-AY OR RATE 6559
18. REMARKS			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE 22	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 28300 UTP	22. STATION CODE 75013
23. INTEGREE CODE	24. MILEAGE CODE 1	25. DATE OF BIRTH MO DA YR 08 04 35	26. DATE OF GRADE MO DA YR 12 17 67
27. DATE OF LEI MO DA YR 12 17 67	28. NTE EXPIRES MO DA YR	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1 - CSC 2 - CIA 3 - PICA 4 - CODE
31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO DA YR	33. SECURITY REQ NO	34. SER
35. VET PREFERENCE CODE 0 - NONE 1 - 5 PT 2 - 10 PT	36. SERV COMP DATE MO DA YR	37. LONG COMP DATE MO DA YR	38. CAREER CATEGORY CODE 0 - NONE 1 - YES 2 - NO
39. FEGLI / HEALTH INSURANCE CODE 0 - WAIVER 1 - YES	40. SOCIAL SECURITY NO.	41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 2 YRS) 3 - BREAK IN SERVICE (MORE THAN 2 YRS)	42. LEAVE CAT CODE
43. FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS 1 - YES 2 - NO	44. STATE TAX DATA FORM EXECUTED CODE NO TAX STATE CODE 1 - YES 2 - NO	SIGNATURE OR OTHER AUTHENTICATION	

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2-26-67

FORM 1150

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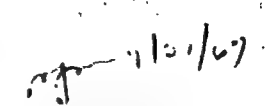
FVS

GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

MAH: 20 SEPT 67

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION												
OCF												
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)										
036130		FLORES DANIEL										
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT				
CHANGE OF COST CENTER NUMBER						09 07 67		REGULAR				
6. FUNDS		X		V TO V		V TO CF		7. Financial Analysis No. Chargeable		8. CSC OR OTHER LEGAL AUTHORITY		
		CF TO V		CF TO CF		8235 0620 0000		50 USC 403 J				
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION						
DDP/WH WH/COG INTELLIGENCE BRANCH OPERATIONS SUPPORT SECTION						WASH., D.C.						
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION				
INTELLIGENCE ASST						1174		D				
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE				
GS				0301.28		06 3		6263				
18. REMARKS												
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. MGRN. CODE	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI	
37	10	NUMERIC	ALPHABETIC	75013			MO	DA	YR	MO	DA	YR
		51500	WH				08	04	35			
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REG NO.		34. SER
NO	DA	YR		1 - CSC	2 - CDA	3 - PCA	4 - PCA	5 - PCA	6 - PCA	EOD DATA		
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG COMP. DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO.		
CODE	0 - NONE	NO	DA	YR	NO	DA	YR	CODE	CODE	0 - WAIVER	HEALTH INS CODE	
	1 - 5 PT									1 - YES		
	2 - 10 PT											
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA		
CODE				CODE		FORM EXECUTED: CODE				FORM EXECUTED: CODE		
0 - NO PREVIOUS SERVICE						1 - YES				1 - YES		
1 - NO BREAK IN SERVICE						2 - NO				2 - NO		
2 - BREAK IN SERVICE LESS THAN 3 YRS												
3 - BREAK IN SERVICE MORE THAN 3 YRS												
SIGNATURE OR OTHER AUTHENTICATION												
												

FORM 1150

Use Previous Edition

SECRET

MAH

GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

SECRET
(When Filled In)

6-43

P100

NOTIFICATION OF PERSONNEL ACTION									
OCS 10/07/67									
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)							
036130		FLORES DANIEL							
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
CONV. TO CAREER EMPLOYEE STATUS				MO. DA. YR. 03 11 65					
6. FUNDS		X		V TO V		V TO CF		7. FINANCIAL ANALYSIS NO. CHARGEABLE	
		CF TO V		CF TO CF				8. CSC OR OTHER LEGAL AUTHORITY	
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION					
DUP/HM DIVISION									
11. POSITION TITLE				12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION			
						D			
14. CLASSIFICATION SCHEDULE (GS, LR, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE		
18. REMARKS									
SIGNATURE OR OTHER AUTHENTICATION									

SECRET

(When Filled In)

MAIL: 28 JULY 67

NOTIFICATION OF PERSONNEL ACTION

6CF

1. SERIAL NUMBER		2. NAME (LAST FIRST-MIDDLE)	
036130		FLORES DANIEL	
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT
PROMOTION & PAY ADJUSTMENT TO FULL TIME		07 130 167	REGULAR
6. FUNDS	7. Financial Analysis No. Chargeable	8. CSC OR OTHER LEGAL AUTHORITY	
X	8235 1162 0000	50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION	
DDP/WH WH/COG INTELLIGENCE BRANCH OPERATIONAL SUPPORT SECTION		WASH., D.C.	
11. POSITION TITLE		12. POSITION NUMBER	13. SERVICE DESIGNATION
INTELLIGENCE ASST		1174	D
14. CLASSIFICATION SCHEDULE (GS, LO, WH)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY GS RATE
GS	0301.28	06 3	6263
18. REMARKS			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE
28	10	51500 WH	75013
23. DATE OF BIRTH	24. DATE OF GRADE	25. DATE OF LEI	26. DATE OF ACTION
08 104 35 17	30 67	07 130 67	
27. DATE OF BIRTH	28. DATE OF GRADE	29. DATE OF LEI	30. DATE OF ACTION
08 104 35 17	30 67	07 130 67	
31. DATE OF BIRTH	32. DATE OF GRADE	33. DATE OF LEI	34. DATE OF ACTION
08 104 35 17	30 67	07 130 67	
35. VET PREFERENCE	36. SERV COMP DATE	37. LONG COMP DATE	38. CAREER CATEGORY
39. FEDERAL TAX DATA	40. STATE TAX DATA	41. PREVIOUS CIVILIAN GOVERNMENT SERVICE	42. LEAVE CAT
SIGNATURE OR OTHER AUTHENTICATION			

POSTED

08-07-67

FORM 1120

Use Previous Edition

SECRET

File

OFFICE OF PERSONNEL

OFFICE OF PERSONNEL

653

1. Serial No.		2. Name		3. Last Letter Number		4. LWOP Status				
036130		FLORES DANIEL		51 500 V						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Pay Date	Grade	Step	Salary	Effective Date	Pst	ESI	ADJ
GS 05	3	5,573	03/14/65	GS 05	4	5,694	03/13/66			
8. Remarks and Authentication										
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input checked="" type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS <i>dt</i> AUDITED BY <i>dt</i>										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE: <i>[Signature]</i> DATE <i>9 FEB 66</i>										
PAY CHANGE NOTIFICATION										

Form 145 500E May 2-65

(4-51)

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-504, PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 3 JULY 1966

NAME	SERIAL	ORGAN.	FUND	GR-STEP	OLD SALARY	NEW SALARY
FLORES DANIEL	036130	51	500	V GS 05 4	\$ 5,694	\$ 5,859

FJH: 21 SEPT 66

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION																																																																																																																																																					
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)																																																																																																																																																			
036130		FLORES DANIEL																																																																																																																																																			
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT																																																																																																																																															
REASSIGNMENT				09 19 66		PART TIME																																																																																																																																															
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY																																																																																																																																																	
X		7235 1162 0000		50 USC 403 J																																																																																																																																																	
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION																																																																																																																																																	
DDP/WH WH/C INTELLIGENCE BRANCH OPERATIONAL SUPPORT SECTION				WASH., D.C.																																																																																																																																																	
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION																																																																																																																																															
INTELLIGENCE CLERK				1176		D																																																																																																																																															
14. CLASSIFICATION SCHEDULE (GS, GS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE																																																																																																																																															
GS		0301.27		05 4		5859																																																																																																																																															
REMARKS																																																																																																																																																					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																																																																																																																																																					
<table border="1"> <thead> <tr> <th colspan="2">ACTION CODE</th> <th colspan="2">30 EMPLOY CODE</th> <th colspan="2">31. OFFICE CODING</th> <th colspan="2">32 STATION CODE</th> <th colspan="2">33. INTEREST CODE</th> <th colspan="2">34. DATE OF BIRTH</th> <th colspan="2">35. DATE OF GRADE</th> <th colspan="2">37. DATE OF SET</th> </tr> <tr> <th colspan="2"></th> <th colspan="2"></th> <th colspan="2">NUMERIC ALPHABETIC</th> <th colspan="2"></th> <th colspan="2"></th> <th colspan="2">MO DA YR.</th> <th colspan="2">MO DA YR.</th> <th colspan="2">MO DA YR.</th> </tr> </thead> <tbody> <tr> <td colspan="2">7</td> <td colspan="2">36</td> <td colspan="2">51500 WH</td> <td colspan="2">75013</td> <td colspan="2">1</td> <td colspan="2">08 04 35</td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td colspan="2">31. DA YR.</td> <td colspan="2">32. SPECIAL REFERENCE</td> <td colspan="2">33. RETIREMENT DATA</td> <td colspan="2">34. SEPARATION DATA CODE</td> <td colspan="2">35. CORRECTION/CANCELLATION DATA</td> <td colspan="2">36. SECURITY REQ. NO.</td> <td colspan="2">37. SES</td> <td colspan="2"></td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2">1. CSC 2. PICA 3. NONE</td> <td colspan="2"></td> <td colspan="2">1. YES 2. NO</td> <td colspan="2">1. YES 2. NO</td> <td colspan="2">1. YES 2. NO</td> <td colspan="2"></td> </tr> <tr> <td colspan="2">38. PREFERENCE</td> <td colspan="2">39. SERV. COMP. DATE</td> <td colspan="2">40. LONG. COMP. DATE</td> <td colspan="2">41. CAREER CATEGORY</td> <td colspan="2">42. PEGIT / HEALTH INSURANCE</td> <td colspan="2">43. SOCIAL SECURITY NO.</td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td colspan="2">1. NONE 2. 10 PY 3. 10 PY</td> <td colspan="2">MO DA YR.</td> <td colspan="2">MO DA YR.</td> <td colspan="2">CAREER CODE</td> <td colspan="2">CODE 1. YES 2. NO</td> <td colspan="2">HEALTH INS. CODE</td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td colspan="4">44. PREVIOUS GOVERNMENT SERVICE DATA</td> <td colspan="2">45. LEAVE CAT. CODE</td> <td colspan="4">46. FEDERAL TAX DATA</td> <td colspan="4">47. STATE TAX DATA</td> </tr> <tr> <td colspan="4">1. NO PREVIOUS SERVICE 2. NO BREAK IN SERVICE 3. BREAK IN SERVICE (LESS THAN 3 YRS.) 4. BREAK IN SERVICE (MORE THAN 3 YRS.)</td> <td colspan="2">1. YES 2. NO</td> <td colspan="4">FEDERAL TAX CODE 1. YES 2. NO</td> <td colspan="4">STATE TAX CODE 1. YES 2. NO</td> </tr> </tbody> </table>										ACTION CODE		30 EMPLOY CODE		31. OFFICE CODING		32 STATION CODE		33. INTEREST CODE		34. DATE OF BIRTH		35. DATE OF GRADE		37. DATE OF SET						NUMERIC ALPHABETIC						MO DA YR.		MO DA YR.		MO DA YR.		7		36		51500 WH		75013		1		08 04 35						31. DA YR.		32. SPECIAL REFERENCE		33. RETIREMENT DATA		34. SEPARATION DATA CODE		35. CORRECTION/CANCELLATION DATA		36. SECURITY REQ. NO.		37. SES								1. CSC 2. PICA 3. NONE				1. YES 2. NO		1. YES 2. NO		1. YES 2. NO				38. PREFERENCE		39. SERV. COMP. DATE		40. LONG. COMP. DATE		41. CAREER CATEGORY		42. PEGIT / HEALTH INSURANCE		43. SOCIAL SECURITY NO.						1. NONE 2. 10 PY 3. 10 PY		MO DA YR.		MO DA YR.		CAREER CODE		CODE 1. YES 2. NO		HEALTH INS. CODE						44. PREVIOUS GOVERNMENT SERVICE DATA				45. LEAVE CAT. CODE		46. FEDERAL TAX DATA				47. STATE TAX DATA				1. NO PREVIOUS SERVICE 2. NO BREAK IN SERVICE 3. BREAK IN SERVICE (LESS THAN 3 YRS.) 4. BREAK IN SERVICE (MORE THAN 3 YRS.)				1. YES 2. NO		FEDERAL TAX CODE 1. YES 2. NO				STATE TAX CODE 1. YES 2. NO			
ACTION CODE		30 EMPLOY CODE		31. OFFICE CODING		32 STATION CODE		33. INTEREST CODE		34. DATE OF BIRTH		35. DATE OF GRADE		37. DATE OF SET																																																																																																																																							
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SIGNATURE OR OTHER AUTHENTICATION																																																																																																																																																					
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED 21 SEP 66 </div>																																																																																																																																																					

1130

Use Previous
Edition

SECRET

 LABEL 1
 10-100-100-100
 100-100-100-100
 100-100-100-100

(When Filled In)

SECRET
(When Filled In)

RZF: 28 JAN 66

NOTIFICATION OF PERSONNEL ACTION									
1 SERIAL NUMBER		2 NAME (LAST-FIRST MIDDLE)							
036130		FLORES DANIEL							
3 NATURE OF PERSONNEL ACTION				4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT			
CHG IN STRENGTH COUNT				01 30 66		PART TIME			
6 FUNDS		7 TO V		7 TO CP		7 COST CENTER NO. CHARGEABLE		8 CLK OR OTHER LEGAL AUTHORITY	
X						6235 1162 0000		50 USC 403 J	
9 ORGANIZATIONAL DESIGNATIONS				10 LOCATION OF OFFICIAL STATION					
DDP/WH WH/C INTELLIGENCE BRANCH REPORTS AND REQUIREMENTS SECTION				WASH., D.C.					
11 POSITION TITLE				12 POSITION NUMBER		13 SERVICE DESIGNATION			
INTELLIGENCE CLERK				1184		D			
14 CLASSIFICATION SCHEDULE (GS, LO, etc.)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE			
GS		0301.27		05 3		5523			
18 REMARKS									
THIS ACTION CORRECTS COMPUTER CODING TO REFLECT CHANGE IN STRENGTH COUNT OF PART TIME PERSONNEL IN ACCORDANCE WITH PROVISIONS OF HR-20-10, REVISED 21 DECEMBER 1965.									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING		22 STATION CODE	23 INTEGRAL CODE	24 HOURS CODE	25 DATE OF BIRTH	26 DATE OF GRADE	27 DATE OF LEI
33	36	NUMERIC	ALPHABETIC	75013			08 04 35		
28 NTE EXPIRES		29 SPECIAL REFERENCE		30 RETIREMENT DATA		31 SEPARATION DATA CODE		32 CORRECTION/CANCELLATION DATA	
								EOD DATA	
33 VET. PREFERENCE		34 SERV. COMP. DATE		35 LONG. COMP. DATE		36 CAREER CATEGORY		37 FEGLI / HEALTH INSURANCE	
41 PREVIOUS GOVERNMENT SERVICE DATA				42 LEAVE CAT.		43 FEDERAL TAX DATA		44 STATE TAX DATA	
SIGNATURE OR OTHER AUTHENTICATION									

FORM 1150
11 62Use Previous
Edition

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 49-301,
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND A-DCI POLICY DIRECTIVE DATED 8 OCTOBER 1952."

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1965

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
FLORES DANIEL	036130	51	500	V GS 05 3	\$ 5,330	\$ 5,523

PJM: 25 AUG 65

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER
036130
2. NAME (LAST-FIRST-MIDDLE)
FLORES DANIEL

3. NATURE OF PERSONNEL ACTION

REASSIGNMENT

4. EFFECTIVE DATE

08 | 25 | 65

5. CATEGORY OF EMPLOYMENT

PART TIME

6. FUNDS

X

V TO V

V TO CF

CF TO V

CF TO CF

7. COST CENTER NO. CHARGEABLE

6235 1162 (XXX)

8. CSC OR OTHER LEGAL AUTHORITY

50 USC 403 J

9. ORGANIZATIONAL DESIGNATIONS

DDP/WH WH/C
INTELLIGENCE BRANCH
REPORTS AND REQUIREMENTS SECTION

10. LOCATION OF OFFICIAL STATION

WASH., D.C.

11. POSITION TITLE

INTELLIGENCE CLERK

12. POSITION NUMBER

1184

13. SERVICE DESIGNATION

D

14. CLASSIFICATION SCHEDULE (GS, LO, etc.)

GS

15. OCCUPATIONAL SERIES

0301.27

16. GRADE AND STEP

05 3

17. SALARY OR RATE

5330

18. REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION NO. (Employ Code)	20. OFFICE CODING (Numeric Alphabetic)	21. STATION CODE	22. INTEGREE CODE	23. Major Code	24. DATE OF BIRTH	25. DATE OF GRADE	26. DATE OF LEI
37	20	515001	WH	75013	08 14 35		
27. NTE EXPIRES	28. SPECIAL REFERENCE	29. RETIREMENT DATA	30. SEPARATION DATA CODE	31. CORRECTION/CANCELLATION DATA	32. SECURITY REQ NO	33. SEX	
34. VET. PREFERENCE	35. SERV. COMP. DATE	36. LONG. COMP. DATE	37. CAREER CATEGORY	38. FEGLI / HEALTH INSURANCE	39. SOCIAL SECURITY NO.		
40. PREVIOUS GOVERNMENT SERVICE DATA	41. LEAVE CAT CODE	42. FEDERAL TAX DATA	43. STATE TAX DATA				

SIGNATURE OR OTHER AUTHENTICATION

8-27-65 W

FORM 1150
11-62Use Previous
Edition

SECRET

 USED
 (Include 1-40 contacts
 Group 1 and
 Group 2)

(When Filled In)

1 Serial No		2 Name		3 Cost Center Number		4 LWOP Hours				
036130		FLORES DANIEL		49 150 ^{36F} _V						
5 OLD SALARY RATE				6 NEW SALARY RATE				7 TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PS	LS	ADJ.
GS 05	2	\$ 5,165	03/15/64	GS 05	3	\$ 5,330	03/14/65			
8 Remarks and Authentication										
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS <i>WKS</i> AUDITED BY <i>WKS</i> I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE. SIGNATURE: <i>[Signature]</i> DATE 15 Feb. 1964 PAY CHANGE NOTIFICATION										

Form 560

Obsolete Previous Edition

(4-51)

DLB: 5 FEB 65

SECRET
(When Filled In)

OCF														NOTIFICATION OF PERSONNEL ACTION													
1. SERIAL NUMBER				2. NAME (LAST-FIRST-MIDDLE)																							
036130				FLORES DANIEL																							
3. NATURE OF PERSONNEL ACTION										4. EFFECTIVE DATE				5. CATEGORY OF EMPLOYMENT													
PAY ADJUSTMENT TO PART TIME FROM FULL TIME										MO. DA. YR. 02 03 65				PART TIME													
6. FUNDS				7. COST CENTER NO. CHARGEABLE				8. CSC OR OTHER LEGAL AUTHORITY																			
X				5235 1162 0000				50 USC 403 J																			
9. ORGANIZATIONAL DESIGNATIONS										10. LOCATION OF OFFICIAL STATION																	
DDP/SAS COUNTER-INTELLIGENCE STAFF OPERATIONS SECTION										WASH., D. C.																	
11. POSITION TITLE										12. POSITION NUMBER				13. SERVICE DESIGNATION													
INTELLIGENCE ASST										1130				D													
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)				15. OCCUPATIONAL SERIES				16. GRADE AND STEP				17. SALARY OR RATE															
GS				0301.28				05 2				5165															
18. REMARKS																											
SUBJECT TO WORK ON REGULARLY SCHEDULED TOUR NOT TO EXCEED 19 HOURS PER WEEK. SUBJECT WILL BE WORKING MONDAY THROUGH FRIDAY, FROM 1400 TO 1700.																											
31 50																											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																											
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGREE CODE		24. HOURS CODE		25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LET											
28		28		49150 SAS		75013				1		03 04 35		03 16 64		03 16 64											
28 WFE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION, CANCELLATION DATA		33. SECURITY REG NO		34. SEX															
MO. DA. YR.				1. CSC 2. FICA 3. NONE		CODE		TYPE MO. DA. YR.		EOD DATA																	
35. VET. PREFERENCE		36. SERV COMP DATE		37. LONG. COMP. DATE		38. CAREER CATEGORY		39. PEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO																	
CODE		0. NONE 1. 5 PT 2. 10 PT		MO. DA. YR.		MO. DA. YR.		CAR. DES. PRA. TEMP		CODE		CODE		0. WAIVER 1. YES		HEALTH INS CODE											
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT CODE				43. FEDERAL TAX DATA				44. STATE TAX DATA															
CODE				FORM EXECUTED CODE				NO TAX EXEMPTIONS				FORM EXECUTED CODE															
0. NO PREVIOUS SERVICE 1. NO BREAK IN SERVICE 2. BREAK IN SERVICE LESS THAN 3 YRS 3. BREAK IN SERVICE (MORE THAN 3 YRS)				1. YES 2. NO				1. YES 2. NO				1. YES 2. NO															
SIGNATURE OR OTHER AUTHENTICATION														POSTED													
[Signature]														02/05/65 WK													

1126

Use Previous
Edition

SECRET

[illegible]

When filed by:

DLB: 9 FEB 65

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 036130		2. NAME (LAST FIRST MIDDLE) FLORES DANIEL													
3. NATURE OF PERSONNEL ACTION PAY ADJUSTMENT TO PART TIME FROM FULL TIME (CORRECTION)		4. EFFECTIVE DATE 02 08 65		5. CATEGORY OF EMPLOYMENT PART TIME											
6. FUNDS X V TO V CF TO V		7. COST CENTER NO. CHARGEABLE 5235 1162 0000		8. CLK OR OTHER LEGAL AUTHORITY 50 USC 403 J											
9. ORGANIZATIONAL DESIGNATIONS DDP/SAS COUNTER-INTELLIGENCE STAFF OPERATIONS SECTION		10. LOCATION OF OFFICIAL STATION WASH., D. C.													
11. POSITION TITLE INTELLIGENCE ASST		12. POSITION NUMBER 1130		13. SERVICE DESIGNATION D											
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0301.28		16. GRADE AND STEP 05 2		17. SALARY OR RATE 5165									
18. REMARKS THIS ACTION CORRECTS FORM 1150 EFFECTIVE DATE 02/08/65 AS FOLLOWS: ITEM #19, ACTION CODE, WHICH READ 28, TO READ 31. ITEM #20, EMPLOYEE CODE, WHICH READ 36, TO READ 20.															
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL															
19. ACTION CODE 31		20. EMPLOYEE CODE 20		21. OFFICE CODES 49150 SAS		22. STATION CODE 75013		23. INTEGRITY CODE 1		24. DATE OF BIRTH 08 04 35		25. DATE OF GRADE 03 16 64		26. DATE OF 1ST 03 16 64	
27. DATE EXPIRES NO DA YR		28. SPECIAL REFERENCE		29. RETIREMENT DATA 1. 1ST 2. 2ND 3. 3RD		30. SEPARATION DATA CODE		31. CORRECTION/CANCELLATION DATA TYPE NO DA YR		32. SECURITY STO NO		33. 1ST		34. 2ND	
35. VET PREFERENCE CODE 1 2 3 4 5 6 7 8 9 10 11 12		36. SALT (COMP DATE)		37. LONG COMP DATE		38. CARRIED CATEGORY		39. PERSAL/HEALTH INSURANCE CODE 1 2 3 4 5 6 7 8 9 10 11 12		40. SOCIAL SECURITY NO.		41. 1ST		42. 2ND	
43. PREVIOUS GOVERNMENT SERVICE NO. 1 1. NO PREVIOUS SERVICE 2. NO SERVED IN SERVICE 3. SERVED IN SERVICE 1945-1949 4. SERVED IN SERVICE 1950-1954 5. SERVED IN SERVICE 1955-1959 6. SERVED IN SERVICE 1960-1964		44. LEAVE (1ST 2ND 3RD 4TH 5TH 6TH 7TH 8TH 9TH 10TH 11TH 12TH)		45. PERSAL/HEALTH DATA 1. 1ST 2. 2ND 3. 3RD 4. 4TH 5. 5TH 6. 6TH 7. 7TH 8. 8TH 9. 9TH 10. 10TH 11. 11TH 12. 12TH		46. 1ST		47. 2ND		48. 3RD		49. 4TH		50. 5TH	
SIGNATURE OR OTHER AUTHENTICATION															
FOSTED 1/16/65															

150 1160

Use Previous
Edition

SECRET

150 1160

Use Previous
Edition

150 1160

Use Previous
Edition

SALARY CONVERTED TO RATE SHOWN FOR INDIVIDUAL'S GRADE AND STEP AS INDICATED IN CHART BELOW.

[illegible]

MHC: 6 AUG 64

SECRET
(When Filled In)

OCCF NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)							
036130		FLORES DANIEL							
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
REASSIGNMENT				08 06 64		REGULAR			
6. FUNDS		7. POST CENTER NO. (CHARGEABLE)		8. CSC OR OTHER LEGAL AUTHORITY					
X		5235 1162 0000		50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION					
DDP/SAS COUNTER-INTELL STAFF OPERATIONS SECTION				WASH., D.C.					
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION			
INTELLIGENCE ASST				1130		D			
14. CLASSIFICATION SCHEDULE (GS, LB, MC)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS		0301.28		05 2		4850			
18. REMARKS									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODES		22. STATION CODE	23. INTELLIGENCE CODE	24. MAJOR CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LST
37	10	49150 SAS		75013		1	08 04 35		
28. MTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION, CANCELLATION DATA		33. SECURITY RES NO	34. SER
35. DEF. PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE	38. CAREER CATEGORY	39. FEELT / HEALTH INSURANCE		40. SOCIAL SECURITY NO	
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA	
SIGNATURE OR OTHER AUTHENTICATION									
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> 10-110 08/13/64 2/K </div>									

FORM 1150

Use Previous
Editions

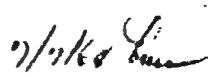
SECRET

6 AUG 1964



(When Filled In)

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION									
ADPD 07/01/64									
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)							
036130		FLCRES DANIEL							
3. NATURE OF PERSONNEL ACTION					4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT		
REASSIGNMENT					06 19 64				
6. FUNDS		V TO V		V TO (I)		7. COST (ENTER NO. CHARGEABLE)		8. (X) OR OTHER LEGAL AUTHORITY	
CF TO V		CF TO (I)		4232 1000 1000					
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION				
DDP/SAS INTELL ST OPS SUP SEC					WASH., D. C.				
11. POSITION TITLE					12. POSITION NUMBER		13. EXTERIOR SERVICE DESIGNATION		
TRANSLATOR					0922		D		
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE		
GS			1049.01		09				
18. REMARKS									
SIGNATURE OR OTHER AUTHENTICATION									
<div style="text-align: right;">  </div>									

Form 11-50
1-63 (Rev. 1-63)

Use Previous
Edition

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND DOD
MEMORANDUM DATED 1 AUGUST 1986, SALARY IS ADJUSTED AS FOLLOWS,
EFFECTIVE 5 JANUARY 1984.

					OLD	NEW
NAME	SERIAL	ORGAN FUNDS	GR-ST		SALARY	SALARY
FLORES DANIEL	036130	49 350 V	GS 04 2		\$ 4,250	\$ 4,395

SECRET
(When Filled In)

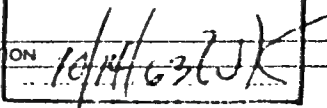
RZP: 3 MAY 83

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)									
036130		FLORES DANIEL									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE				5. CATEGORY OF EMPLOYMENT			
REASSIGNMENT				05 09 83				REGULAR			
6. FUNDS		7. V TO V		8. V TO CF		9. COST CENTER NO. CHARGEABLE		10. CSC OR OTHER LEGAL AUTHORITY			
X						3232 1000 1000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP/SPECIAL AFFAIRS STAFF RESEARCH BRANCH REPORTS, RECORDS, TRANSLATION SEC						WASH., D.C.					
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION			
TRANSLATOR						0702		D			
14. CLASSIFICATION SCHEDULE (GS, LO, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS				0031.01		04 2		4250			
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. OFFICE CODING		21. STATION CODE		22. INTEGRATE CODE		23. DATE OF BIRTH		24. DATE OF GRADE	
37 10		51350 SAS		75013				03 04 35			
25. DATE EXPIRES		26. SPECIAL REFERENCE		27. RETIREMENT DATA		28. SEPARATION DATA CODE		29. CORRECTION/CANCELLATION DATA		30. SECURITY REQ NO	
								EOD DATA			
31. VET PREFERENCE		32. SAMP (CMP) DATE		33. LONG (CMP) DATE		34. CAREER CATEGORY		35. PECT / HEALTH INSURANCE		36. SOCIAL SECURITY NO	
37. PREVIOUS GOVERNMENT SERVICE DATA				38. LEAVE CAT		39. FEDERAL TAX DATA		40. STATE TAX DATA			
SIGNATURE OR OTHER AUTHENTICATION											
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED 12 May 1983 J.D. </div>											

SECRET

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

AMPD 07/31/63									
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)							
036130		FLORES DANIEL							
3. NATURE OF PERSONNEL ACTION					4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT		
REASSIGNMENT					MO DAY YEAR 07 21 63				
6. FUNDS		X		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE	
		CF TO V		CF TO CF		4232 1000 1000		8. CSC OR OTHER LEGAL AUTHORITY	
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION				
DDP/SAS					WASH., D.C.				
11. POSITION TITLE					12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION		
TRANSLATOR					0702		D		
14. CLASSIFICATION SCHEDULE (GS 18, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE		
GS			1045:01		04				
18. REMARKS									
<div align="right"> <div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED </div> </div>									
SIGNATURE OR OTHER AUTHENTICATION									
<div align="right">  </div>									

Form 1-63 1150P

Use Previous Edition

SECRET

CLASSIFIED
Noted for automatic
downgrading and
declassification

(When Filled In)

(45)

2061200

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours				
036130		FLORES DANIEL		39 400 V 9						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last EN Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ.
GS 04	1	\$ 4,110	03/11/62	GS 04	2	\$ 4,250	03/17/63			
8. Remarks and Authentication										
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS AUDITED BY I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE. SIGNATURE: <i>[Signature]</i> DATE 7 Feb, 1963 PAY CHANGE NOTIFICATION <i>[Signature]</i>										

Form 560

Obsolete Previous Edition

(431)

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 37 - 792 AND
 DCI MEMORANDUM DATED : AUGUST 1956 - SALARY IS ADJUSTED AS FOLLOWS.
 EFFECTIVE 14 OCTOBER 1962

NAME	SERIAL	ORGN	FUNDS	OLD GR-ST SALARY	OLD GR-ST SALARY	NEW GR-ST SALARY	NEW GR-ST SALARY
FLORES DANIEL	036130	39400	V	04 1 \$ 4040	04 1 \$ 4110		

BWS: 13 MARCH 62

SECRET
(When Filled In)

OAF															
NOTIFICATION OF PERSONNEL ACTION															
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)													
036130		FLORES DANIEL													
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE			5. CATEGORY OF EMPLOYMENT						
EXCEPTED APPOINTMENT (CAREER PROVISIONAL)						MO DA YR 03 11 62			REGULAR						
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE			8. CSC OR OTHER LEGAL AUTHORITY						
X		CF TO V		CF TO CF		2226 1200 1000			50 USC 403 J						
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION									
DDP OPSER R I DIV REFERENCE BRANCH INDEX SECTION - NIGHT SHIFT						WASH., D. C.									
11. POSITION TITLE						12. POSITION NUMBER			13. CAREER SERVICE DESIGNATION						
FILE CLERK						0147			D						
14. CLASSIFICATION SCHEDULE (GS, LB, etc)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP			17. SALARY OR RATE						
GS				0305.01		04 1			4040						
18. REMARKS															
SUBJECT TO THE SATISFACTORY COMPLETION OF A TRIAL PERIOD OF ONE YEAR. SUBJECT TO THE SATISFACTORY COMPLETION OF A MEDICAL EXAMINATION.															
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL															
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGREE CODE		24. MGRS. CODE					
11		10		NUMERIC ALPHABETIC 39400 RI		75013				1					
25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI		28. DATE OF BIRTH		29. DATE OF GRADE		30. DATE OF LEI					
MO DA YR 08 04 35		MO DA YR 03 11 62		MO DA YR 03 11 62		MO DA YR 03 11 62		MO DA YR 03 11 62		MO DA YR 03 11 62					
31. NTE EXPIRES		32. SPECIAL REFERENCE		33. RETIREMENT DATA		34. SEPARATION DATA CODE		35. CORRECTION/CANCELLATION DATA		36. SECURITY REG NO.					
MO DA YR 03 11 62		1. CSC 2. PFA 3. NONE		CODE 1		TYPE 1		MO DA YR 03 11 62		07100 MI					
37. VET PREFERENCE		38. SERV COMP DATE		39. LONG COMP DATE		40. MIL. SERV CREDIT/LEI		41. PEGIT / HEALTH INSURANCE		42. SOCIAL SECURITY NO.					
0		MO DA YR 03 11 58		MO DA YR 03 11 62		CODE P		CODE 1		460486230					
43. PREVIOUS GOVERNMENT SERVICE DATA				44. LEAVE CAT				45. FEDERAL TAX DATA				46. STATE TAX DATA			
CODE 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (LESS THAN 12 MOS) 3 BREAK IN SERVICE (MORE THAN 12 MOS)				CODE 6				CODE 1				CODE 0			
47. SIGNATURE OR OTHER AUTHENTICATION				48. SIGNATURE OR OTHER AUTHENTICATION				49. SIGNATURE OR OTHER AUTHENTICATION				50. SIGNATURE OR OTHER AUTHENTICATION			

CLASSIFICATION

FITNESS REPORT

SECTION A GENERAL INFORMATION									
1. EMPLOYEE NUMBER		2. NAME (Last, first, middle)			3. DATE OF BIRTH		4. SEX	5. GRADE	6. SU
460-48-6230		Flores, Daniel			4Aug35		M	GS13	DQG
7. OFFICIAL POSITION TITLE				8. DIVISION OF ASSIGNMENT		9. STATION		10. CODE (See 11)	
Ops. Officer				DDO/LA		Mexico City		NCS. DE	
11. TYPE OF APPOINTMENT					12. TYPE OF REPORT				
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT	<input type="checkbox"/> SPECIAL			
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> OTHER	13. REPORTING PERIOD (FROM-TO)			14. DATE REPORT DUE IN U.P.			
			10Oct78 - 30Sep79						

SECTION B QUALIFICATIONS UPDATE	
IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.	

SECTION C PERFORMANCE EVALUATION	
<u>U-Unsatisfactory</u>	Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.
<u>M-Marginal</u>	Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.
<u>P-Proficient</u>	Performance is satisfactory. Desired results are being produced in the manner expected.
<u>S-Strong</u>	Performance is characterized by exceptional proficiency.
<u>O-Outstanding</u>	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SPECIFIC DUTY NO. 1	RATING LETTER
SEE ATTACHED MEXICO CITY TELEPOUCH 51744 (in 3383966) dtd 13 Nov 79.	
SPECIFIC DUTY NO. 2	RATING LETTER
SPECIFIC DUTY NO. 3	RATING LETTER
SPECIFIC DUTY NO. 4	RATING LETTER
SPECIFIC DUTY NO. 5	RATING LETTER
SPECIFIC DUTY NO. 6	RATING LETTER

OVERALL PERFORMANCE IN CURRENT POSITION	
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, personal personal traits or habits, and particular strengths or talents. Based on your knowledge of employee's overall performance during the rating period place the letter in the rating box corresponding to the judgement which most closely reflects his level of performance.	
	RATING LETTER

FORM 43 USE PREVIOUS EDITIONS

CLASSIFICATION

11 SEP 79 11 00

CLASSIFICATION

SECTION D

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section C to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate report.

NOV 15 3 01 AM '79
MAIL ROOM

SEE ATTACHED.

SECTION E

CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

13 Nov 79

OFFICIAL TITLE OF SUPERVISOR

DCOS

TYPED OR PRINTED NAME AND SIGNATURE

Robert Berg. /S/

2. BY EMPLOYEE

I HAVE ☐ OR HAVE NOT ☒ ATTACHED A STATEMENT CONCERNING THE SUPERVISOR'S EVALUATION OF MY PERFORMANCE.

DATE

13 Nov 79

SIGNATURE OF EMPLOYEE

Daniel Flores /S/

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

SEE ATTACHED.

DATE

13 Nov 79

OFFICIAL TITLE OF REVIEWING OFFICIAL

COS

TYPED OR PRINTED NAME AND SIGNATURE

Stewart D. Burton /S/

4. BY EMPLOYEE

I HAVE ☐ OR HAVE NOT ☒ ATTACHED A STATEMENT CONCERNING THE REVIEWER'S EVALUATION OF MY PERFORMANCE.

13 Nov 79

SIGNATURE OF EMPLOYEE

Daniel Flores /S/

CLASSIFICATION

/20/ EYES ONLY*

CONFIDENTIAL

FRP:

EYES ONLY

DEFERRED TELEPOUCH

ACTION: C/LA-5 (653) INFO: RF, FILE, (7/W)

79 3383966

PAGE 001
TOR: 132307Z NOV 79

3383966
MEXI 51744

CONFIDENTIAL 132241Z NOV 79 DEFERRED TELEPOUCH

CITE MEXICO CITY 51744

TO: WASHINGTON.

FOR: C/LA/PERS

SUBJECT: ADMIN/RYPAT/PERS/FR FOR *Daniel Flores*

1. GIVEN BELOW IS THE FITNESS REPORT FOR ~~REDACTED~~ FOR THE PERIOD 1 OCT 78 TO 30 SEP 79. RATINGS ON SPECIFIC DUTIES AND NARRATIVE COMMENTS WERE PREPARED BY HAROLD N. CHALDEZ, DCOS. REVIEWING COMMENTS WERE PREPARED BY RONALD F. BRIERLEY, COS. THE REPORT HAS BEEN REVIEWED AND CERTIFIED BY SUBJECT. SIGNED COPY OF FORM 45A BEING POUCHED.

2. THE FOLLOWING INFO IS KEYED TO FORM 45N, SECTION A:
1. 034130; 4. M; 5. GS-13; 6. DOG; 9. MEXICO CITY; 10. CAREER;
11. ANNUAL; 12. 1 OCT 78 TO 30 SEP 79.

3. SECTION B. PERFORMANCE EVALUATION - SPECIFIC DUTIES:
1. DIRECTS THE ACTIVITIES OF AN 18-MAN CI LIAISON TEAM RESPONSIBLE TO THE STATION. RATING LETTER - S.

2. RESPONSIBLE FOR TARGETTING CI OPERATIONS AGAINST SOVIET AND CUBANS IN MEXICO CITY. RATING LETTER - S.

3. CASE OFFICER FOR AGENTS AND OPERATIONS DIRECTED AGAINST THE CUBAN TARGET. RATING LETTER - S.

4. SUPPORTS STATION OPERATIONS AND ACTIVITIES DIRECTED AGAINST THE CHINESE AND OTHER TARGETS.

5. CASE OFFICER FOR ONE LIAISON PENETRATION. RATING LETTER - S.

OVERALL RATING - STRONG.

0-63 2 MEXICO CITY 51744 C O N F I D E N T I A L

CONFIDENTIAL

CONFIDENTIAL

DEFERRED TELEPOUCH

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PAGE 002
TOR: 132307Z NOV 793383966
MEXI 51744

4. SECTION C - NARRATIVE COMMENTS.

SHORTLY BEFORE THE DEPARTURE OF THE FORMER COS, HE SUBMITTED A SPECIAL MEMORANDUM ON SUBJECT'S PERFORMANCE (MEXICO CITY 50702) WHICH CONCENTRATED MOSTLY ON SUBJECT'S RESPONSIBILITIES IN THE CI FIELD. A COPY OF THIS MEMORANDUM IS AVAILABLE IN SUBJECT'S PERSONNEL FILE. THE UNDERSIGNED FULLY ENDORSES THE LAUDATORY COMMENTS IN THAT MEMORANDUM, BUT SINCE SUBJECT HAS TAKEN ON BROADER RESPONSIBILITIES, IT IS NECESSARY TO COMMENT ON OTHER ASPECTS OF HIS WORK.

FOR THE PAST MONTHS, SUBJECT HAS BEEN DIVIDING HIS TIME ABOUT EQUALLY BETWEEN HIS CI RESPONSIBILITIES AND OTHER STATION OBJECTIVES, PRINCIPALLY THE CUBAN TARGET. SUBJECT WAS GIVEN THESE ADDITIONAL DUTIES BECAUSE THE CI OPERATIONS GROUP IS WELL ORGANIZED AND REQUIRES LESS DIRECT C/O INPUT, AND ALSO BECAUSE OF THE NEED TO DEDICATE ALL AVAILABLE RESOURCES AGAINST THE CUBAN TARGET. THIS STATION IS ONE OF FOUR WITHIN THE DIRECTORATE WHICH HAVE BEEN SELECTED FOR A CONCENTRATED EFFORT AGAINST CUBA, AND THIS TARGET NOW RANKS NUMBER ONE AMONG THE STATION'S MANY PRIORITY OBJECTIVES. SUBJECT'S PAST EXPERIENCE IN CUBAN OPERATIONS, HIS ABILITY TO PASS AS A NATIVE IN THIS COUNTRY, AND HIS OTHER STRENGTHS, WERE THE INGREDIENTS WHICH THE STATION NEEDED TO EXPLOIT IN THIS EFFORT.

SUBJECT HAS TAKEN OVER THE PRINCIPAL STATION OPERATION DIRECTED AGAINST CUBA. THIS WAS A FAIRLY NEW OPERATION AT THE TIME IT WAS ASSIGNED TO SUBJECT AND IT WILL MATURE UNDER HIS DIRECTION. FOR REASONS OF SENSITIVITY, A MORE DETAILED REVIEW OF SUBJECT'S WORK ON THIS OPERATION CANNOT BE PROVIDED, BUT THE RECORD SHOULD NOTE THAT DURING THE PAST THREE MONTHS, HE HAS HANDLED THIS OPERATION IN A THOROUGHLY PROFESSIONAL MANNER WITH STEADY PROGRESS BEING MADE TO FULLY EXPLOIT THE OPERATIONAL AND REPORTING POTENTIAL. ALSO DURING THIS REPORTING PERIOD, SUBJECT RENEWED CONTACT THROUGH HIS OWN EFFORTS WITH A FORMER REPORTING ASSET WHO HAD DRIFTED AWAY FROM COLLABORATION WITH THE ORGANIZATION. SUBJECT IS NOW ATTEMPTING TO BREATHE NEW LIFE INTO THIS OPERATION AND BRING IT BACK UNDER CONTROL.

SUBJECT ALSO COOPERATED WITH ANOTHER GOVERNMENT AGENCY IN ATTEMPTING TO RE-ESTABLISH CONTACT WITH A LOCAL CUBAN

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DEFERRED TELEPOUCH

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TUR: 132307Z NOV 79

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MEXI 51744

OFFICIAL DURING THE TARGET'S VISIT TO THE BORDER AREA. SUBJECT WAS IN CHARGE OF COORDINATING THIS OPERATION WITH LOCAL LIAISON AND WITH THE OTHER AGENCY. THE OPERATION WAS SUCCESSFUL FROM THE POINT OF VIEW OF ARRANGING A MEETING WITH THE TARGET, BUT SINCE THE TARGET'S RETURN TO THE CAPITAL CITY, HE HAS REFUSED EFFORTS BY SUBJECT TO CONTINUE CONTACT.

ANOTHER EFFORT AGAINST THE CUBAN TARGET UNDER SUBJECT'S RESPONSIBILITY INVOLVES THE RESOURCES OF THE SPECIAL CI OPERATIONS GROUP. FOR SOME MONTHS NOW, THIS GROUP HAS BEEN TRYING TO MOUNT A SENSITIVE FI COLLECTION EFFORT AND PROSPECTS REMAIN ENCOURAGING THAT THIS EFFORT WILL SOON BE OPERATIONAL. THIS IS A FAIRLY COMPLEX UNDERTAKING WHICH REQUIRES PATIENCE AND AN ELEMENT OF GOOD LUCK IN ORDER TO BE SUCCESSFUL. SUBJECT DESERVES CONSIDERABLE CREDIT FOR THE PROGRESS MADE THUS FAR AND IF EVERYTHING GOES ACCORDING TO PLAN, THIS OPERATION SHOULD BE PRODUCING WITHIN A SHORT PERIOD OF TIME.

APART FROM HIS WORK AGAINST THE CUBAN TARGET, SUBJECT WAS SUCCESSFUL IN RECRUITING AN ACCESS AGENT AGAINST A CHINESE OFFICIAL AND LATER WAS ABLE TO ESTABLISH CLOSE RAPPORT WITH THE OFFICIAL HIMSELF. FOLLOWING UP ON A LEAD FROM ANOTHER SOURCE THAT A LOCAL NATIONAL HAD A CLOSE RELATIONSHIP WITH A CHINESE OFFICIAL, SUBJECT USED HIS NATIVE LANGUAGE AND APPEARANCE AND RECRUITED THE LOCAL UNDER THE GUISE OF BEING A MEXICAN GOVERNMENT OFFICIAL WHO WANTED TO MONITOR THE ACTIVITIES OF THE CHINESE IN MEXICO. ASSESSMENT INFORMATION OBTAINED FROM THE NEW SOURCE GREATLY FACILITATED THE ABILITY OF SUBJECT TO ESTABLISH CLOSE RAPPORT WITH THE CHINESE OFFICIAL ONCE CONTACT WAS MADE. SUBJECT WAS ABLE TO DISCERN THAT THE TARGET WAS POTENTIALLY VULNERABLE ON SEXUAL GROUNDS, BUT TIME DID NOT PERMIT THIS VULNERABILITY FROM BEING EXPLOITED BEFORE THE TARGET COMPLETED HIS TOUR AND DEPARTED THE COUNTRY. STATION REGRETS THAT A LEAD TO THIS TARGET WAS NOT IDENTIFIED EARLIER, BUT THIS DOES NOT DETRACT FROM THE PROFESSIONAL MANNER IN WHICH SUBJECT EXPLOITED EVERY OPPORTUNITY TO PUSH THIS CASE FORWARD AGAINST AN UNREALISTIC DEADLINE.

THIS REPORTING PERIOD HAS AGAIN BEEN ONE OF CONSIDERABLE ACTIVITY ON THE PART OF SUBJECT IN WHICH HE HAS DEMONSTRATED HIS TALENT FOR OPERATIONS AND PARTICULARLY HIS ABILITY TO

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DEFERRED TELEPOUCH

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3383966
MEXI 51744

DEVELOP AND HANDLE AGENTS. HE HAS DISPLAYED VERSATILITY AND FLEXIBILITY IN PURSUING HIS TARGETS AND IS EVER ALERT FOR VULNERABILITIES WHICH CAN BE EXPLOITED. HE USES GOOD JUDGMENT IN HANDLING HIS CASES AND HIS TRADecraft PROCEDURES DURING THIS PERIOD HAVE BEEN SOUND. IT SHOULD ALSO BE NOTED THAT THE PARTICULAR CUBAN CASES WHICH HE IS INVOLVED ARE NOT EASY ONES. THEY REQUIRE HARD WORK, AND THE FULL RANGE OF CASE OFFICER EXPERIENCE IN ORDER TO PUSH THEM FORWARD. HIS RESPONSIBILITIES IN THE CI FIELD ARE EQUALLY DEMANDING. SUBJECT HAS MADE A VERY POSITIVE CONTRIBUTION TO THE WORK OF THIS STATION DURING THIS REPORTING PERIOD AND WELL DESERVES A RATING OF STRONG FOR HIS VARIOUS DUTIES AND A STRONG FOR HIS OVERALL PERFORMANCE.

5. COMMENTS BY REVIEWING OFFICER.

I CONCUR WITH THIS EVALUATION AND BELIEVE IT IS MOST COMPREHENSIVE AND OBJECTIVE. HAVING WORKED WITH SUBJECT DURING AN EARLIER PERIOD OF HIS CAREER WHEN HE WAS THEN A GOOD OFFICER (1970-72), I AM STRUCK BY THE REMARKABLE PROGRESS HE HAS MADE IN THREE KEY AREAS: OPERATIONAL THINKING AND ANALYSIS, WRITING, AND SOUND, PROFESSIONAL APPLICATION OF BASIC OPERATIONAL PRINCIPLES.

I AM DELIGHTED THIS HIGHLY CAPABLE, AGGRESSIVE OFFICER WILL BE REMAINING A THIRD YEAR AT THIS STATION AND LOOK FORWARD TO A MAJOR CONTRIBUTION FROM HIM IN MOST OPERATIONAL AREAS OF PRESENT PRIORITY CONCERN. RVN 13 NOV 99 DRV D9C.3.

END OF MESSAGE

CONFIDENTIAL

CONFIDENTIAL

FITNESS REPORT				NOTE: Supervisor or Reviewing Official may assign a higher classification if CONFIDENTIAL is not adequate for the report when completed.			
SECTION A GENERAL INFORMATION							
1. EMPLOYEE NUMBER		2. NAME (last, first, middle)		3. DATE OF BIRTH		4. SEX	5. GRADE
036130		Flores, Daniel		08/04/35		M	GS-13 DQG
7. OFFICIAL POSITION TITLE				8. OFF/DIV/BR OF ASSIGNMENT		9. CURRENT STATION	
Ops Officer				DDO/LA/COG		Hqs	
10. TYPE OF APPOINTMENT				11. TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> CAREER PROVISIONAL	<input type="checkbox"/> RESERVE	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> 21-MONTH	<input type="checkbox"/> 30-MONTH	<input type="checkbox"/> REASSIGNMENT	<input type="checkbox"/> SPECIAL
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> TEMPORARY	12. REPORTING PERIOD (From-to)		13. DATE REPORT DUE IN O.P.		
				1 Dec 76 - 30 Sep 77		31 October 77	
SECTION B PERFORMANCE EVALUATION							
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-Strong Performance is characterized by exceptional proficiency.</p> <p>O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1						RATING LETTER	
Supervise the LA/COG/EA and Canada section which includes two operations officers, one intelligence analyst, and a secretary.						S	
SPECIFIC DUTY NO. 2						RATING LETTER	
As section chief, provide operational guidance and support to the field stations' efforts to develop and recruit Cubans in that area.						S	
SPECIFIC DUTY NO. 3						RATING LETTER	
Assume direct case officer responsibility for sensitive on-island reporting sources, including TDY travel for debriefing purposes when the assets are available; developing leads for potential recruitment efforts against new targets.						S	
SPECIFIC DUTY NO. 4						RATING LETTER	
Coordinate with other area division desks and components to provide maximum support to Cuban operational activities in their respective field stations.						S	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER	
						S	

CONFIDENTIAL

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position, keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for future action. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, supplies, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Mr. Flores came to the Cuba Operations Group from a brief assignment to the Office of Training. Prior to the OTR interim, Mr. Flores had been a COG case officer and was therefore familiar with its operational techniques. During this ten-month period under review, Mr. Flores served as a section chief with responsibilities for East Asian stations with a Cuban target (Tokyo, Manila, and Hong Kong) and Canada. Mr. Flores was the only GS-13 officer to hold section chief responsibility, yet his performance compared favorably with that of the GS-14 section chiefs. As a section chief, Mr. Flores was supervisor for two operations officers, one intelligence analyst and a secretary. He was responsible for ensuring the prompt handling of correspondence to and from the field stations, and providing operational guidance and direction on matters pertaining to Cuban operations. His section was managed in a competent manner with Mr. Flores demonstrating his ability to delegate functional responsibilities.

The Cuba Operations Group also functions in a direct case officer capacity, and Mr. Flores frequently traveled TDY to handle cases. He was the operations officer for one particularly sensitive and productive on-island reporting case. This required him to travel on short notice and to arrange for secure meeting and debriefing sessions of this reporting source.

Mr. Flores also traveled to Canada on various occasions to meet with liaison contacts and participate in developmental operations. One particular recruitment attempt required Mr. Flores to spend several days in a motel room observing the

--CONTINUED--

SECTION D

CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

Rating: *5.1* File: *151177*

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

DC/LA/COG

Donald H. Winters

2. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE

DATE

SIGNATURE OF EMPLOYEE

HAVE ATTACHED

HAVE NOT ATTACHED

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Subject likes to operate. He is very practical, experienced, and realistic. He is, however, a little quiet and tends to accept things the way they are. While I have no doubt as to his skills, he may need a bit more management experience to learn how to make things move despite obstacles. He has done a fine job running the East Asian and Canada section of Cuba Operations Group.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

C/LA/COG

Frederick W. Latrash

4. BY EMPLOYEE

I CERTIFY THAT I HAVE BEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

CONFIDENTIAL

CONFIDENTIAL

FITNESS REPORT

Daniel Flores

NARRATIVE COMMENTS

cont.

movements of an operational target, and to devise a secure and timely method of approach to the individual Cuban.

In comparing Mr. Flores' performance as an operations officer and as a supervisor, I believe his performance is somewhat stronger in the former capacity. Mr. Flores has all the attributes of an excellent case officer: he is aggressive, thinks operationally, and is fast on his feet in an operational situation. He is further aided by his fluency in Spanish and has on more than one occasion successfully passed himself off as a Mexican businessman. During his TDY travels, he has repeatedly demonstrated dedication to the job at hand, willingness to work long hours, and a flexibility to handle all types of situations.

Mr. Flores is less enthusiastic when it comes to the paperwork and bureaucratic requirements of his position. While he is a good writer, he tends to handle his written tasks in a hurried manner and consequently, his work oftentimes requires review. He is also inclined to take the shorter and easier approach when handling the paper flow requirements. I mention these points not because they represent basic shortcomings, but simply to contrast them to his exceptionally high performance in his operations officer capacity.

In sum, Mr. Flores is an extremely experienced, competent and well motivated operations officer. His talent as a "street operator" with a keen sense for the human target has been amply demonstrated. He has now quite successfully been introduced to his first supervisory position and proven that he is competent for assignments of this nature. I believe Mr. Flores is capable of handling positions of increasing responsibility and should be given the opportunity to do so.

* * *

CONFIDENTIAL

SECRET
CLASSIFICATION

FITNESS REPORT

SECTION A GENERAL INFORMATION									
1. EMPLOYEE NUMBER 036130	2. NAME (Last, first, middle) FLORES, Daniel	3. DATE OF BIRTH 4 Aug 35	4. SEX M	5. GRADE 12	6. GD 12				
7. OFFICIAL POSITION TITLE Instructor Ops		8. OFF/DIV/BR OF ASSIGNMENT DDA/OTR/LTD	9. CURRENT STATION Hqs.	10. CODE (15 000) X HQS	11. DP				
11. TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> CONTRACT <input type="checkbox"/> OTHER (Spec.) <input type="checkbox"/> TEMPORARY <input type="checkbox"/> ANNUAL			12. TYPE OF REPORT <input checked="" type="checkbox"/> REASSIGNMENT <input type="checkbox"/> SPECIAL						
13. REPORTING PERIOD (7001-50) 22 June - 19 November 1976			14. DATE REPORT DUE IN O.P. N/A						

SECTION B QUALIFICATIONS UPDATE	
IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD 'YES' IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD 'NO' IN THE BOX AT RIGHT.	
<input type="checkbox"/>	
SECTION C PERFORMANCE EVALUATION	
U—Unsatisfactory	Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.
M—Marginal	Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.
P—Proficient	Performance is satisfactory. Desired results are being produced in the manner expected.
S—Strong	Performance is characterized by exceptional proficiency.
O—Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES	
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).	
SPECIFIC DUTY NO. 1 Conducts tutorial training in clandestine operational trade-craft skills for foreign agent and liaison personnel as well as U.S. staff and contract personnel.	RATING LETTER S
SPECIFIC DUTY NO. 2 In collaboration with sponsoring Agency components prepares detailed training programs and schedules for the conduct of tailored tutorial and small-group training.	RATING LETTER S
SPECIFIC DUTY NO. 3 Evaluate trainee performance in each program and prepare final training reports, and as appropriate draft follow-up questionnaires for field evaluation of training effectiveness.	RATING LETTER S
SPECIFIC DUTY NO. 4 Participate in live problems and exercises as surveillant and role player as required and contribute to improvement in training materials and techniques.	RATING LETTER S
SPECIFIC DUTY NO. 5	RATING LETTER
SPECIFIC DUTY NO. 6	RATING LETTER

OVERALL PERFORMANCE IN CURRENT POSITION	
Take into account everything about the employee which influences his effectiveness in his current position and his performance of specific duties. Consider his performance in all assignments, past and present, and his performance in this position. Rate on the basis of his performance in this position during the rating period. Enter the letter in the rating box corresponding to the employee's overall performance.	
Rating Letter	

S E C R E T
CLASSIFICATION

SECTION D NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated by current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain when it provides best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and the use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

Mr. Flores joined the Agent and Liaison Training Unit in mid-June 1976 and after a week's familiarization with training materials, aids and office routine of the Unit, he attended a two-week Instructor Training Workshop at the Special Training Center. On completion of the Workshop, Subject returned to the Unit for further familiarization with the routine of the Unit, assisted in several surveillance problems, and monitored a two-week training program which included active participation as a trainee himself in the SAI (or persuasion skills) portion of the program. Subsequently Mr. Flores assisted as a role-player in a brief but significant program involving the training of a prominent U.S. citizen assisting the Agency in southern Africa. Mr. Flores then assisted another instructor in devising and conducting the first program this Unit has undertaken designed to teach surveillance awareness/detection to Staff Employees who are deemed likely to be subjects of terrorist surveillance and attack. Mr. Flores then planned for, and from 12 October through 19 November conducted a tutorial training program in clandestine operations tech-

(continued)

SECTION E CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 4 Months	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE 17 January 1977	OFFICIAL TITLE OF SUPERVISOR Chief, ALT Unit	TYPED OR PRINTED NAME AND SIGNATURE Walter R. Cox

2. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE	DATE 26 Jan 77	SIGNATURE OF EMPLOYEE <i>[Signature]</i>
<input type="checkbox"/> HAVE ATTACHED	<input type="checkbox"/> HAVE NOT ATTACHED	

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL <p>I concur in the ratings on specific duties and on the overall rating of STRONG for Mr. Flores. Although he was assigned to this Unit for a short period of time, he was proving to be a well qualified operations instructor. His home Division requested his return in order to give him a responsible position for which he was well qualified, and he should do well on that assignment.</p>								
DATE 19/1/77	OFFICIAL TITLE OF REVIEWING OFFICIAL Chief, ALT Unit	TYPED OR PRINTED NAME AND SIGNATURE <i>[Signature]</i>						
<table border="1"> <tr> <td>1. EMPLOYEE HAS BEEN SHOWN THIS REPORT</td> <td>2. BY EMPLOYEE</td> <td>3. BY SUPERVISOR</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>			1. EMPLOYEE HAS BEEN SHOWN THIS REPORT	2. BY EMPLOYEE	3. BY SUPERVISOR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. EMPLOYEE HAS BEEN SHOWN THIS REPORT	2. BY EMPLOYEE	3. BY SUPERVISOR						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						

SECRET

Continuation of Section D of Fitness Report on Daniel Flores,
GS-12, for period 22 June - 19 November 1976 -----

niques for a U.S. citizen who is scheduled to serve as an NOC
Officer in the Caribbean.

The first independent training task given to Mr. Flores was of a third-national field agent serving as an access agent, but this task was cancelled at the last minute when the concerned Base discovered grounds for field termination of the agent rather than providing tutorial training for the agent in the U.S. Mr. Flores was justifiably irritated at this turn of events which denied him what held promise for being a challenging initial training program.

It was with regret that we learned, early into what turned out to be Mr. Flores' only independent training program, that a priority requirement of his home-base Division would necessitate his return to Division duty soonest. The Division agreed to our request that Mr. Flores conclude the training program he had tailored, and begun, and Mr. Flores is to be commended for having done an exceptionally fine job in this assignment. The completion-of-training report was also well organized, and the questionnaire which asks for an evaluative follow-up from the trainee's field Station is to the point.

Early in his assignment Mr. Flores took over the maintenance and improvement of the Unit's operations training slides, consolidated them into an extremely functional package, and solicited ideas from other instructors to improve the package. Much to his credit and the Unit's benefit, Mr. Flores managed to persuade another Agency component to undertake--without charge--a major revamping of some of the slides using computer-designed art work to replace some of the less impressive early work in this field.

SECRET

CLASSIFICATION

FITNESS REPORT

SECTION A

GENERAL INFORMATION

1. EMPLOYEE NUMBER 100-48-6230 036130	2. NAME (Last, first, middle) Flores, Daniel	3. DATE OF BIRTH 4 Aug 35	4. SEX M	5. GRADE GS13	6. DOG DOG
7. OFFICIAL POSITION TITLE Ops Officer	8. SUPERVISING OFFICER DDO/LA	9. CURRENT LOCATION Mexico City	10. CODE (CA, FI) HUS	11. OF	
11. TYPE OF APPOINTMENT		12. TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	INITIAL	<input checked="" type="checkbox"/> ANNUAL	REASSIGNMENT
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> OTHER	13. REPORTING PERIOD (from-to) 15 Feb - 30 Sept 78		14. DATE REPORT DUE IN O.P.

SECTION B

QUALIFICATIONS UPDATE

IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.

SECTION C

PERFORMANCE EVALUATION

U—Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.

M—Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.

P—Proficient Performance is satisfactory. Desired results are being produced in the manner expected.

S—Strong Performance is characterized by exceptional proficiency.

O—Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SPECIFIC DUTY NO. 1 SEE ATTACHED MEXICO CITY 47396 (IN 1584998) dtd 18 Nov 78	RATING LETTER
SPECIFIC DUTY NO. 2	RATING LETTER
SPECIFIC DUTY NO. 3	RATING LETTER
SPECIFIC DUTY NO. 4	RATING LETTER
SPECIFIC DUTY NO. 5	RATING LETTER
SPECIFIC DUTY NO. 6	RATING LETTER

OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, personal growth, traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most closely reflects his level of performance.

RATING LETTER

FORM 45

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CLASSIFICATION

SECTION D

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section C to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

24 10 54 AM '78

SEE ATTACHED.

HAR ROOM

SECTION E

CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

Rating Officer Profile:

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

18 Nov 78

DCOS

Robert Berg /S/

2. BY EMPLOYEE

I HAVE ☐ OR HAVE NOT ☒ ATTACHED A STATEMENT CONCERNING THE SUPERVISOR'S EVALUATION OF MY PERFORMANCE.

DATE

SIGNATURE OF EMPLOYEE

18 Nov 78

Daniel Flores /S/

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

SEE ATTACHED.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

18 Nov 78

COS

Lawrence Sternfield /S/

4. BY EMPLOYEE

I CERTIFY I HAVE BEEN THE EMPLOYEE IN ALL SECTIONS OF THIS REPORT. I HAVE ☐ HAVE NOT ☒ ATTACHED A STATEMENT CONCERNING THE REVIEWING OFFICIAL'S EVALUATION OF MY PERFORMANCE.

DATE

SIGNATURE OF EMPLOYEE

18 Nov 78

Daniel Flores /S/

CLASSIFICATION

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CONFIDENTIAL

FRD:

EYES ONLY

DEFERRED TELEPOUCH

ACTION: C/LA-5 (593) INFO: WF, FILE, (7/A)

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TOW: 182031Z NOV 78

1584998
MEXI 47396

CONFIDENTIAL 172250Z NOV 78 DEFERRED TELEPOUCH

CITE MEXICO CITY 47396

TO: WASHINGTON.

FOR: C/LA/PENS

SUBJECT: ADMIN/RVHAT/PERS/FITNESS REPORT FOR [REDACTED]

Per

Dan Flores

1. GIVEN BELOW IS THE FITNESS REPORT ON SUBJECT FOR THE PERIOD 15 FEB - 30 SEPT 78. RATING ON SPECIFIC DUTIES AND NARRATIVE COMMENTS WERE PREPARED BY HAROLD O. CHAIDEZ, DCOS. REVIEWING COMMENTS WERE PREPARED BY JOEL N. NEBECKER, COS. SUBJECT WAS NOT SHOWN A COPY OF THIS REPORT AS HE DEPARTED STATION ON EMERGENCY LEAVE BEFORE THE REPORT COULD BE TYPED. A COPY WILL BE MADE AVAILABLE TO HIM IMMEDIATELY UPON HIS RETURN AND ANY STATEMENT BY THE EMPLOYEE WILL BE TELEPOUCHED TO HQS. A SIGNED COPY OF FORM 45A WILL BE POUCHED AT THAT TIME.

2. THE FOLLOWING INFO IS KEYED TO FORM 45A, SECTION A:
1. 036130; 4. M; 5. GS-13; 6. DUG; 9. MEXICO CITY;
10. CAREER; 11. ANNUAL; 12. 15 FEB-30 SEP 78.

3. SECTION B. PERFORMANCE EVALUTATION - SPECIFIC DUTIES:

1. DIRECTS THE ACTIVITIES OF AN 18-MAN CI LIAISON TEAM RESPONSIBLE TO THE STATION, AND WHICH INCLUDES COORDINATING ALL RTACTION OPS INITIATED BY THE TEAM. RATING LETTER -- S.

2. RESPONSIBLE FOR TARGETTING CI OPERATIONS AGAINST SOVIETS AND CUBANS IN MEXICO CITY. RATING LETTER -- S.

3. CASE OFFICER FOR TWO PENETRATIONS OF LIAISON. RATING LETTER -- S.

4. COORDINATES SENSITIVE CI OPERATIONS RUN BY OTHER NONLIAISON AGENCIES WITH LIAISON COUNTERPARTS. RATING

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DEFERRED TELEPOUCH

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LETTER -- S.

5. CONDUCTS OTHER LIAISON RELATED CI ACTIVITY AND PREPARES NECESSARY MEMORANDA AND REPORTS. RTAING LETTER -- S.

OVERALL PERFORMANCE -- S.

4. SECTION C - NARRATIVE COMMENTS

THIS IS THE INITIAL REPORT WRITTEN ON SUBJECT AND COVERS A PERIOD OF SEVEN AND ONE-HALF MONTHS SINCE HIS ARRIVAL IN MEXICO IN FEB 78. SUBJECT HAS BEEN IN THE ORGANIZATION FOR OVER 16 YEARS AND SERVED TWO O/S ASSIGNMENTS PRIOR TO MEXICO CITY.

HIS PRIMARY DUTY IS TO SUPERVISE THE OPERATIONS OF A CI UNIT COMPOSED OF PERSONNEL SUPPLIED BY LIAISON BUT WHICH IS UNDER THE OPERATIONAL DIRECTION OF THE STATION. THIS PARTICULAR UNIT REPRESENTS THE NUCLEUS OF THE STATION'S CI OPERATIONAL CAPABILITY. IT IS ALSO A STRONG CONTRIBUTOR TO STATION'S EFFORTS DIRECTED AGAINST THE HARD TARGETS IN THE FI FIELD. SUBJECT PARTICIPATES IN ALL LEVELS OF ACTIVITY WITH THIS UNIT FROM THAT OF A MANAGER TO SERVING AS AN OPERATIONS OFFICER. THE LEADERSHIP AND EXAMPLE WHICH HE SETS HAVE BEEN AN ESSENTIAL INGREDIENT IN THE SUCCESS ENJOYED BY THE UNIT IN RECENT MONTHS. IN APRIL 1978, THE STATION UNDERTOOK AN AUDIO OPERATION DIRECTED AT THE OFFICIAL OUT-OF-TOWN RETREAT OF A PRINCIPAL ADVERSARY IN MEXICO. SUBJECT PARTICIPATED IN THE RECRUITMENT OF A CARETAKER WHO PROVIDED ACCESS TO THE TARGET INSTALLATION AND WAS SUBSEQUENTLY INVOLVED IN ALL ASPECTS OF THE OPERATION EXCEPT THE ACTUAL INSTALLATION OF THE TECHNICAL DEVICES. THIS SUCCESSFUL OPERATION WAS FOLLOWED BY ANOTHER ONE THE FOLLOWING MONTH, THIS TIME DIRECTED AT THE HOTEL ROOMS OF A VISITING COMMUNIST DIGNITARY. TWO VALUABLE REPORTS WERE PRODUCED FROM THIS OPERATION ON THE POLICIES AND PLANS OF

A FOREIGN COMMUNIST PARTY. IN JULY, SUBJECT SUPERVISED THE RECRUITMENT OF AN AGENT WHO HAS ESTABLISHED ACCESS TO A HOSTILE OFFICIAL INSTALLATION. A TECHNICAL OPERATION IS NOW UNDERWAY TO EXPLOIT THE SOURCE'S ACCESS.

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IN SEPTEMBER, ANOTHER OPERATION BEGAN AGAINST THE RETREAT OF THE SAME PRINCIPAL ADVERSARY MENTIONED ABOVE SINCE A NEW PROPERTY HAD BEEN ACQUIRED. AGAIN, SUBJECT PARTICIPATED IN THE RECRUITMENT OF THE CARETAKER OF THE NEW SITE AND IN OTHER PHASES OF THE OPERATION WHICH CONTINUE AT THIS TIME.

IN ADDITION TO THESE SPECIFIC OPERATIONS, THE CI UNIT ALSO CARRIES OUT A HOST OF BACKGROUND INVESTIGATIONS, SURVEILLANCE, AND OTHER WORK AS REQUIRED IN THE CI FIELD. SINCE MEXICO CITY SERVES AS PROBABLY THE PRINCIPAL BASE FOR OPERATIONS BY THE SOVIETS AND THE CUBANS AGAINST THE UNITED STATES, SELECTIVE TASKING MUST BE UNDERTAKEN TO OBTAIN MAXIMUM EFFICIENCY FROM THIS SMALL UNIT.

SUBJECT ALSO HANDLES TWO PENETRATIONS OF THE CI UNIT, AND IS ALSO RESPONSIBLE FOR PROVIDING SUPPORT THROUGH THIS UNIT TO OTHER CI ACTIVITIES DIRECTED AGAINST SOVIET AND CUBAN ESPIONAGE IN MEXICO.

INDEED, THE FIRST PART OF HIS TOUR IN MEXICO HAS BEEN A BUSY ONE. THE STATION FINDS HIM TO BE AN ENERGETIC, VERSATILE, AND HIGHLY QUALIFIED OFFICER. HE HAS HANDLED THE PERSONNEL AND OPERATIONAL PROBLEMS WHICH HAVE SURFACED WITH HIS CI UNIT WITH TACT AND EFFICIENCY, AND HIS RAPPORT WITH HIS LIAISON COUNTERPARTS IS VERY GOOD. DURING RECENT CONVERSATIONS, SENIOR MEXICAN SECURITY OFFICIALS HAVE EXPRESSED THEIR HIGH REGARD FOR SUBJECT'S ABILITIES.

HIS ABILITY TO PASS AS A NATIVE IS AN ADDED FACTOR IN HIS FAVOR AND PROVIDES HIM WITH A GREATER DIMENSION FOR OPERATIONS. THE STATION HAS USED SUBJECT ON OCCASION FOR UNILATERAL OPERATIONS, BUT THIS USE MUST BE SELECTIVE IN ORDER NOT TO ADVERSELY IMPINGE UPON HIS PRIMARY WORK WITH THE CI UNIT.

SUBJECT IS VERY COST CONSCIOUSNESS IN THE USE OF STATION FUNDS AND EXTRACTS A HEALTHY RETURN FOR PROJECT MONIES USED TO SUPPORT THE WORK OF THE CI UNIT.

SUBJECT WELL DESERVES A RATING OF STRONG FOR HIS

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VARIOUS DUTIES AND AN OVERALL STRONG FOR THIS REPORTING PERIOD. WE LOOK FORWARD TO A CONTINUED HIGH LEVEL OF PERFORMANCE DURING THE YEAR TO COME.

5. SECTION D.1. SUBJECT HAS BEEN UNDER MY SUPERVISION FOR SEVEN AND ONE-HALF MONTHS. D.3: COMMENTS BY REVIEWING OFFICIAL:

I FULLY CONCUR WITH THE NARRATIVE COMMENTS OF THE REVIEWER. SUBJECT HAS DISPLAYED A GREAT AMOUNT OF IMAGINATION AND ENERGY IN DIRECTING A DIFFICULT ACTIVITY NAMELY COUNTERINTELLIGENCE ACTIVITY THAT IS SEVERELY RESTRICTED BY ATTORNEY GENERAL GUIDELINES TO THE EXISTING EXECUTIVE ORDER. SUBJECT HAS DESPITE THIS BEEN ABLE TO KEEP A VERY POSITIVE THRUST TO HIS OPERATIONS AND HAS BEEN ABLE TO MOTIVATE THE AGENTS AND PERSONNEL UNDER HIS CONTROL. I AM TOTALLY SATISFIED WITH HIS ENERGY AND MOTIVATION. DESPITE THE FRUSTRATIONS INHERENT IN THE COUNTERINTELLIGENCE ACTIVITY HE CARRIES ON WITH A HIGH SPIRIT AND A TREMENDOUS AMOUNT OF GOOD WILL. NO MEAN ACHIEVEMENT AT THIS JUNCTURE OF AGENCY COUNTERINTELLIGENCE ACTIVITIES. E3, IMPDET.

END OF MESSAGE

CONFIDENTIAL

SECRET
CLASSIFICATION

FITNESS REPORT

SECTION A

GENERAL INFORMATION

1. EMPLOYEE NUMBER 194737	2. NAME (Last, first, middle) Flores, Daniel	3. DATE OF BIRTH 4 Aug 35	4. SEX M	5. GRADE GS-12	6. SD D
7. OFFICIAL POSITION TITLE Operations Officer		8. OFF/DIV/BR OF ASSIGNMENT DDO/LA/COG	9. CURRENT STATION Headquarters		10. CODE (if any) X HQB. DP

11. TYPE OF APPOINTMENT				12. TYPE OF REPORT			
XX CAREER	RESERVE	CONTRACT	OTHER (Spec)	TEMPORARY	XX ANNUAL	REASSIGNMENT	SPECIAL

13. REPORTING PERIOD (from-to) 01 July 1975 - 30 June 1976	14. DATE REPORT DUE IN O.P. 31 July 1976
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SECTION B

QUALIFICATIONS UPDATE

IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.

SECTION C

PERFORMANCE EVALUATION

U—Unsatisfactory	Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.
M—Marginal	Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.
P—Proficient	Performance is satisfactory. Desired results are being produced in the manner expected.
S—Strong	Performance is characterized by exceptional proficiency.
O—Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SPECIFIC DUTY NO. 1 Handle a sensitive and productive on-island agent in Cuban operations via TDY travel to meet, debrief, and prepare operational/intelligence reports.	RATING LETTER O
SPECIFIC DUTY NO. 2 Review incoming operational correspondence from Latin America on Cuban matters and ensure that prompt response and helpful guidance is provided.	RATING LETTER S
SPECIFIC DUTY NO. 3 Maintain a thorough familiarity with all Cuban activities in Latin America and our operations against them; carry out coordination with other components where appropriate.	RATING LETTER S
SPECIFIC DUTY NO. 4 Develop leads against the Cuban target by locating, clearing, and ultimately interviewing relatives, friends, etc., of Cuban officials to obtain assessment data on the targets as well as use the leads in approaches to Cuban officials.	RATING LETTER O
SPECIFIC DUTY NO. 5 Work closely with the IA's of the section to ensure that they answer all required correspondence and to stimulate them to be creative and productive.	RATING LETTER S
SPECIFIC DUTY NO. 6	RATING LETTER

OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.

RATING LETTER

S

SECRET
CLASSIFICATION

SECTION D

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section C to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

This officer has worked under my supervision for approximately six months. This is the first fitness report I have prepared on him. After two field tours and his current assignment to Cuba Operations Group, he has developed into a solid and professional operations officer with the skills we hope our employees will develop. He is now highly motivated and creative in his work. He has demonstrated, particularly in recent months, a gratifying degree of drive and interest.

He has handled one of our most productive and sensitive on-island assets. With his guidance this agent has produced, within the past six months, some of the highest quality intelligence on Cuban plans and intentions this Agency has obtained. Because this agent must be serviced via TDY travel, the responsible case officer must be able to work with very little guidance and have the tradecraft skills and reports writing ability to work largely on his own. With this case Mr. Flores has demonstrated himself to be a first-class agent handler, highly attuned to operational information and quality intelligence production.

As Section Chief I have relied upon him heavily to provide the institutional memory our work demands. He has full grasp of all operations directed against Cuban officials, not only in those countries under his direct responsibility, but throughout Latin America. Since all of the officers in this section travel frequently to meet and debrief agents, Mr. Flores has frequently acted as Section Chief during the absence of the other two officers, a GS-14 position. He has been able to handle the job well both

SECTION E

CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

C/LA/COG/NIA

Leonard D. Therby

2. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE

DATE

SIGNATURE OF EMPLOYEE

HAVE ATTACHED

HAVE NOT ATTACHED

20 Dec 1971

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I agree with the ratings given by the rating officer. Mr. Flores is indeed a fine operations officer and should have an exceptionally successful career in operations. The only weakness in him that I have ever noted is an occasional lack of drive and self-motivation and as noted by the rating officer, particularly in recent months, he seems to have cured this and has indeed been going at a fast pace.

Mr. Flores is leaving Cuba Operations Group for a rotational tour in the Office of Training. I believe that when he finishes this tour, he should return for an operational assignment in the Latin America area. He is an exceptionally fine case officer, has a native command of Spanish, and has a way of dealing with his agents that gets the most out of them. Future tours for him should involve supervision of younger case officers and he should begin to move into the managerial aspects of operations.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

Chief, LV/COG

Thomas A. Clayton

4. BY EMPLOYEE

VERIFY THAT I HAVE BEEN THE EMPLOYER IN ALL OPERATIONS OF THE REPORT

DATE

SIGNATURE OF EMPLOYEE

CLASSIFICATION

S E C R E T

FITNESS REPORT

Daniel Flores

cont.

SECTION D

in terms of paper flow and personnel administration. He demonstrates an ability to advance further along these lines. Also during the period under review he participated in an approach against the local head of Cubana Airlines in a Latin America country. Although the recruitment effort was not successful, it was conducted in a professional manner and Mr. Flores used an access agent relative in a very effective manner.

He has been perhaps the most aggressive officer in the Cuba Operations Group in pursuing leads for interviews of relatives, friends, and acquaintances of Cuban officials posted abroad. During the period under review he conducted at least six such interviews and developed good assessment data on various targets.

As a native Spanish speaker, Mr. Flores has the ability to pass as a foreign national and has successfully carried out roles as a Mexican citizen, using OTS-provided false documents. This ability to pass as non-American has been of great assistance in handling the key case he relinquished only on leaving LA/COG.

Mr. Flores has now overcome an earlier reluctance to be aggressive which former supervisors might have noted. I am confident he will maintain and build further on what I have found to be a highly improved sense of enthusiasm. I am sure he will be a strong contributor to his new component.

* * *

No. 3

He is an officer who merits further responsibility and one who should continue to rise in rank as he assumes these additional responsibilities. It has been a pleasure to work with him and I should like to do so with him in the future.

S E C R E T

E2 IMPDET
CL BY 025231

~~SECRET~~
CLASSIFICATION

FITNESS REPORT										
SECTION A GENERAL INFORMATION										
1. EMPLOYEE NUMBER 194737		2. NAME (last, first, middle) Flores, Daniel			3. DATE OF BIRTH 4 Aug 35		4. SEX M		5. GRADE GS-12	
6. OFFICIAL POSITION TITLE Ops Officer		7. OFF/DIV BR OF ASSIGNMENT DDO/LA/COG			8. CURRENT STATION Washington, D.C.		9. CODE (if any) X		10. DP DP	
11. TYPE OF APPOINTMENT					12. TYPE OF REPORT					
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> CONTRACT	<input type="checkbox"/> OTHER (Spec.)	<input type="checkbox"/> TEMPORARY	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT	<input type="checkbox"/> SPECIAL			
13. REPORTING PERIOD (from-to) 1 October 1974 - 30 June 1975					14. DATE REPORT DUE IN O.P. 31 July 1975					
SECTION B QUALIFICATIONS UPDATE										
IF QUALIFICATION'S UPDATE FORM IS BEING SUBMITTED WITH CHANGES AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.										
SECTION C PERFORMANCE EVALUATION										
<p>U--Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.</p> <p>M--Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.</p> <p>P--Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S--Strong Performance is characterized by exceptional proficiency.</p> <p>O--Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>										
SPECIFIC DUTIES										
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).										
SPECIFIC DUTY NO. 1 Case Officer for COG's Latin America area responsible for operational support of LA field Stations Cuba programs.								RATING LETTER S		
SPECIFIC DUTY NO. 2 Case officer for two sensitive on-island agent operations.								RATING LETTER S		
SPECIFIC DUTY NO. 3 Develop leads to potential Cuban recruitment targets and personally interview prospective access agents.								RATING LETTER S		
SPECIFIC DUTY NO. 4 Supervisor for one Intelligence Analyst								RATING LETTER S		
SPECIFIC DUTY NO. 5								RATING LETTER		
SPECIFIC DUTY NO. 6								RATING LETTER		
OVERALL PERFORMANCE IN CURRENT POSITION										
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.								RATING LETTER S		

CLASSIFICATION

SECTION D

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training, foreign language competence, if required for current position. Amplify or explain ratings given in Section C to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

LA/COG is both a Headquarters and an active operational "station" operating out of Headquarters, responsible for recruitment operations and agent handling. As such, Mr. Flores assignment is a combination of Headquarters desk chief and case officer of a large field station. His performance is being rated in both capacities which means that much higher criteria is being applied than for most Headquarters officers.

Mr. Flores has proved to be a professional agent handler, and has been used very effectively in two new, sensitive operations run from Headquarters. Although he did not participate in the recruitment of these sources, Mr. Flores was brought in to provide initial training, and detailed guidance necessary to develop the new assets into reporting sources. One was a complicated case of a DGI walk-in who Mr. Flores helped debrief, then trained and dispatched back to Cuba. The other was a successful false flag recruitment of a source with excellent access to the Cuban leadership; Mr. Flores' job, after being introduced by the recruiting officer, is to make the source into a fully controlled asset and maximize the excellent potential for intelligence information.

SECTION E

CERTIFICATION AND COMMENTS

1. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
8 August 1975	ADC/LA/COG	M. Michael Kline

2. BY EMPLOYEE	
STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE	DATE
<input type="checkbox"/> HAVE ATTACHED <input type="checkbox"/> HAVE NOT ATTACHED	9 Aug. 1975
SIGNATURE OF EMPLOYEE	
[Signature]	

3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
LA/COG has six operations officers performing duties similar to those assigned to Mr. Flores--Case officer responsible for recruiting/handling agents directed against a hard target and also staff duties as a Desk Chief. These tasks are unique within the Latin America Division as these officers serve as field case officers and also as Headquarters desk officers. All on-island Cuban agents are handled by these six employees. I would rank Mr. Flores in the middle of this group, but it must be taken into consideration that <u>all</u> the other officers are senior in grade.		

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
8 August 1975	AC/LA/COG	Thomas G. Clines

BY EMPLOYEE	
I CERTIFY THAT I HAVE BEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT	DATE
	9 Aug. 1975
SIGNATURE OF EMPLOYEE	
[Signature]	

CLASSIFICATION

SECRET

-2-

Continuation of Section D

His professional, no-nonsense handling has already contributed to highly significant information (a value quotient of 7.0 with one XX report) on some of the Agency's current Cuba priorities including Cuba's negotiating attitude vis-a-vis the U.S.

In his capacity as Desk officer for field stations in Latin America, Mr. Flores is charged with providing guidance and support aimed at recruitment operations against Cuban officials. He has conducted interviews of Cuban exiles in the U.S. and initiated a promising recruitment operation against a well placed third country official in Cuba. He supervises one intelligence analyst and, together, they effectively ensure timely response to field requests and help stations to identify operational opportunities, recruitment targets and--where necessary--keep them aware of the priority of the Cuban target.

By his performance, Mr. Flores has demonstrated he is a versatile case officer with good operational instincts; he is showing increasing aggressiveness and imaginative support of field stations in their efforts to recruit Cuban officials. While he is an excellent agent handler who gets maximum intelligence production from his assets, he is less thorough when handling the administrative details involved in his operations. He needs more supervisory experience, and still tends to rely excessively on his IAs to search for operational leads and conduct operational research.

Mr. Flores was sponsored by the Division, and attended the mid-career course in November 1974. He has excellent potential for further advancement in the Division and has been a significant factor in LA/COG's success over the last year in developing access to Cuba, a recognized hard target.

Continuation of Section E

Subject excels as an agent handler motivating his agents and disciplining them when required to obtain quality intelligence. He handles two of LA/COG's most sensitive on-island agents and during this period, he has met these two agents in Europe and in Latin America. He has certainly targetted these two agents against priority objectives and the intelligence produced has been of vital interest to U.S. Government policymakers in this delicate period of Cuban negotiations. Latin America Division has received commendations from

SECRET

14-00000

SECRET

Continuation of Section E

the intelligence community for reports acquired through Mr. Flores. Subject's staff duties include desk chief responsibilities for support and guidance to field programs including the research and targetting required to conduct an effective recruitment program. Although such duties requiring supervision are new to him, he is also making progress in this capacity. With proper guidance and assistance, he will develop into a most effective supervisor.

Mr. Flores native fluency in Spanish and his Latin background have proven most valuable to Cuban operations. In fact he represents himself as "Latin American" in handling one of this agents. For an officer his grade, he is very mature, self assured, has good common sense and is certainly a professional. Subject has completed two tours in the field and is an experienced ops officer. He is intelligent, imaginative, uses good tradecraft at all times and has a clear headed approach to the business. He expresses himself well orally and in writing, and works very well with other case officers. Mr. Flores keeps up to date on political, economic and social affairs pertaining to Cuba and he willingly accepts difficult tasks requiring frequent separations from his family.

Subject definitely has potential. He is operationally aggressive and is gaining experience as a manager. Mr. Flores is already performing at a higher level than his grade. In approximately a year, he should be again dispatched to the field as a senior officer responsible for handling Soviet, Chinese or Cuban targets. During the next reporting period, Mr. Flores should receive training in supervision. He is a solid performer in the Cuban Operations Group and has contributed much to our successes during the past year.

12

SECRET

CLASSIFICATION

FITNESS REPORT

SECTION A

GENERAL INFORMATION

1. EMPLOYEE NUMBER 194737	2. NAME (Last, first, middle) Flores, Daniel	3. DATE OF BIRTH 4 Aug 35	4. SEX M	5. GRADE GS-12 D	6. SD
7. OFFICIAL POSITION TITLE Ops Officer		8. OFF. DIV BR OF ASSIGNMENT DDO/LA/COG	9. CURRENT STATION Washington, DC		10. CODE (ch one) X
11. TYPE OF APPOINTMENT		12. TYPE OF REPORT			
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> CONTRACT	<input type="checkbox"/> OTHER (Spec)	<input type="checkbox"/> TEMPORARY	<input checked="" type="checkbox"/> ANNUAL
				<input type="checkbox"/> REASSIGNMENT	<input type="checkbox"/> SPECIAL
13. REPORTING PERIOD (from-to) 5 March 1974 - 30 September 1974			14. DATE REPORT DUE IN O.P.		

SECTION B

QUALIFICATIONS UPDATE

IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.

SECTION C

PERFORMANCE EVALUATION

U—Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.

M—Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.

P—Proficient Performance is satisfactory. Desired results are being produced in the manner expected.

S—Strong Performance is characterized by exceptional proficiency.

O—Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SPECIFIC DUTY NO. 1 Primary case officer for a sensitive Cuban penetration agent.	RATING LETTER S
SPECIFIC DUTY NO. 2 Provide operational support and guidance for Cuban operations conducted by LA Division Stations.	RATING LETTER P
SPECIFIC DUTY NO. 3 Direct and supervise Intelligence Assistants assigned to specific areas of responsibilities.	RATING LETTER S
SPECIFIC DUTY NO. 4 Desk case officer for access agents and support assets in LA Division Stations' Cuban operations.	RATING LETTER S
SPECIFIC DUTY NO. 5 Search for leads in the U.S. for LA Division Cuban operations and personally debrief and exploit further exploitation.	RATING LETTER S
SPECIFIC DUTY NO. 6	RATING LETTER

OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.

RATING LETTER
S

FORM 45
1-73

CLASSIFICATION

12. IMPDET CL BY

25 Oct 74

CLASSIFICATION

SECTION D

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section C to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

In a very short time, Mr. Flores has become an important factor in LA/COG's efforts to directly handle Cuban on-island agents, and to expand its recruitment program. His fluent Spanish, past operational experience, versatility and ability to blend into the local scene in most Latin American countries, make him highly qualified for his present assignment. He demonstrates sound operational judgment under often trying conditions, and good ability to communicate effectively both orally and in writing. His frequent TDYs demand long and unusual hours, which he gives ungrudgingly.

Almost immediately after his assignment to LA/COG in March 1974, Mr. Flores was called upon to handle a sensitive walk-in case. The agent had already been recruited and many of the developmental aspects of the case had been resolved prior to Mr. Flores' introduction, but it still required a Headquarters based case officer to provide the necessary continuity wherever the agent surfaced overseas. The case is complicated and time-consuming, involving extended TDYs and utmost adherence to good tradecraft procedures. It has developed into one of our most productive sources of information on Cuban clandestine

SECTION E

CERTIFICATION AND COMMENTS

(cont'd)

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

16 NOV 1974

OFFICIAL TITLE OF SUPERVISOR

LA/COG/OPS

TYPED OR PRINTED NAME AND SIGNATURE

Morton M. Kline

2. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE

DATE

6 Dec 1974

SIGNATURE OF EMPLOYEE

Gail D. B.

HAVE ATTACHED

HAVE NOT ATTACHED

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I concur with the rating officer's comments and performance evaluation. Soon after his arrival at LA/COG, Mr. Flores took over the handling of a sensitive agent. While the agent's bona fides had already been established and his modus operandi determined, considerable ad hoc judgement and direction were required to continue the agent's motivation and ensure his viability. Mr. Flores did extremely well in his guidance of the agent in a series of complicated, extended meetings which took place in several LA countries. Good, professional tradecraft and sound judgement were exhibited by Mr. Flores.

As to his support of LA Station efforts against the Cuban target.

DATE

16 NOV 74

OFFICIAL TITLE OF REVIEWING OFFICIAL

DC/LA/COG

TYPED OR PRINTED NAME AND SIGNATURE

Joseph Skura

(cont'd)

4. BY EMPLOYEE

I CERTIFY THAT I HAVE BEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT

DATE

6 Dec 1974

SIGNATURE OF EMPLOYEE

Gail D. B.

CLASSIFICATION

FITNESS REPORT - Daniel Flores

SECTION D (CONTINUED)

activities in Latin America, due largely to Mr. Flores' professionalism.

Mr. Flores' current assignment is a combination of operational and Headquarters desk responsibilities, the latter calling for the support of field stations in their efforts to develop individual Cuban recruitment programs. His extended TDYs have understandably prevented Mr. Flores from devoting much time to his desk responsibilities and it is somewhat difficult to judge his performance as a desk officer. He has a good grasp of what needs to be done, and his handling of specific tasks indicates good managerial potential. Nevertheless, he does need additional desk experience, especially in areas which will allow him to use his operational ability to support and guide field stations that are developing Cuban operational programs.

COMMENTS BY REVIEWING OFFICIAL (CONTINUED)

this aspect of his performance was less noteworthy, and it is believed more attention and research could have been given to this activity. Mr. Flores writes concisely and well, and his CI/CE instincts are sharp and true. He can be expected to turn in a solid desk performance in the future.

CONFIDENTIAL

FITNESS REPORT				NOTE: Supervisor or Reviewing Official may assign a higher classification if CONFIDENTIAL is not adequate for the report when completed.			
SECTION A. GENERAL INFORMATION							
1. EMPLOYEE NUMBER 194737		2. NAME (last, first, middle) Flores, Daniel		3. DATE OF BIRTH 4 Aug 35		4. SEX M	5. GRADE & SD GS-12 D
7. OFFICIAL POSITION TITLE Ops Officer			8. OFF/DIV/BR OF ASSIGNMENT DDO/WH/Br 3		9. CURRENT STATION Lima, Peru		
10. TYPE OF APPOINTMENT				11. TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> CAREER PROVISIONAL	<input type="checkbox"/> RESERVE	<input type="checkbox"/> ANNUAL	<input type="checkbox"/> 21 MONTH	<input type="checkbox"/> 30-MONTH	<input checked="" type="checkbox"/> REASSIGNMENT	<input type="checkbox"/> SPECIAL
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> TEMPORARY	12. REPORTING PERIOD (From to) 31 May 73-4 March 74		13. DATE REPORT DUE IN O.P.		
SECTION B. PERFORMANCE EVALUATION							
U—Unsatisfactory		Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.					
M—Marginal		Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.					
P—Proficient		Performance is satisfactory. Desired results are being produced in the manner expected.					
S—Strong		Performance is characterized by exceptional proficiency.					
O—Outstanding		Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.					
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							RATING LETTER
SPECIFIC DUTY NO. 1 Station officer responsible for operations against the MPCHEEK target							S
SPECIFIC DUTY NO. 2 Direction of and support for an outside principal agent and the assets handled by this principal agent							S
SPECIFIC DUTY NO. 3 Case officer responsible for a unilateral surveillance team							S
SPECIFIC DUTY NO. 4							RATING LETTER
SPECIFIC DUTY NO. 5							RATING LETTER
SPECIFIC DUTY NO. 6							RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION							RATING LETTER
Take into account everything about the employee as an individual in his current position and as performance of specific duties. Consider his past or job accomplishments, potential for growth or future, and particular limitations or talents. Based on your knowledge of employee as a whole and performance during the rating period, place the letter in the rating box corresponding to the employee which most closely reflects his level of performance.							S

434

CONFIDENTIAL

434

OFFICE "CONFIDENTIAL"

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Subject's tour in Lima has been cut short by the serious illness of his daughter. As a result of this illness it was also necessary for him to spend the months of December and January on emergency leave in the United States, returning without his family in February in order to transfer his ops workload and pack out his personal effects for PCS transfer to Headquarters on 4 March.

Although the undersigned had the privilege of working with Subject only briefly, as rating officer he had the advantage of taking over handling of most of Subject's cases following the departure on emergency leave. Thus he was able to observe first hand and in detail the human material with which Subject had worked, the progress he had made in developing their access and capabilities, and the respect these agents had for him.

During the period covered by this report, Subject continued his pursuit of the MPCHEEK target as his primary operational responsibility. He developed and recruited a prominent member of the local MPCHEEK community who has good access to the MPCHEEK embassy and handled four other access agents. He also handled a unilateral surveillance team and the Station's press placement assets via a principal agent who in turn handled three sensitive assets.

(Continued)

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
4 Mar 74	/s/ Daniel Flores	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
4 Mar 74	DCOS	/s/ Arthur T. Ladenburg
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
As the rater makes clear, Subject will be missed in Lima and we can only sympathize with the reasons why he must now leave. He was doing the Station a great deal of good and advancing his own career nicely as well. It is worth recalling that Subject provided here in Lima over what we understand is still a unique operational feat, a staged recruitment approach to an MPCHEEK official. Also, Subject was often used on a variety of operational tasks having little to do with his assigned targets because, in the		
(Continued)		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
4 Mar 74	CO	/s/ Richard S. Welch

CONFIDENTIAL

CONFIDENTIAL

Continuation of Narrative Comments

In carrying this heavy workload, Subject demonstrated that he is a superior agent handler. He succeeded in conveying to these people a sense of mission and participation which has kept their morale and motivation, and hence their production, at a high level. He also insisted upon work and security discipline, with a result that the record of these agents in prompt and reliable appearance for meetings and in responding in writing to requirements is extraordinarily good. They all have a clear idea of what is expected of them, confidence that performance will be rewarded and conversely that non-performance will not be tolerated. Just prior to his departure, Subject successfully terminated an entire surveillance team of long standing, a measure which was decided upon simply because the team had been heavily used for over five years and from a security standpoint replacement seemed to be in order. Letting old agents go is always a delicate and usually a thankless task. It takes finesse and bargaining skill. Subject showed these and more in divesting us of the team without a hitch.

During his last month in Lima, despite the fact that he was burdened with the problems of closing out his household and the normal operational and administrative cleanup prior to PCS departure, Subject made two very significant contributions to Station objectives. First, he coordinated with the Peruvian Government the official but necessarily discreet visit of a senior BKHERALD officer. Since the Station is not declared, Subject had to maintain his LNGOLD cover throughout, further complicating this delicate assignment. During the visit, he coordinated frequently with the head of the Peruvian National Intelligence Service and with the chief administrative aide of the President of Peru. He also participated directly in one meeting with the President. This was of course not the type of assignment which would normally be entrusted to a "junior officer", but Subject is junior only in relative grade, certainly not in maturity, self-assurance or judgment. Then with only three days left in Lima, Subject led an installation team which entered a building recently purchased by the MPCHECKS, remained for almost 48 hours and made two apparently excellent audio installations.

The Station will miss Subject a great deal. As the above incidents demonstrate, when the tough or sensitive assignments came up, he was the officer we turned to most frequently. He never balks, argues inconvenience, or seeks the way out. He is cooperative, helpful, and in a low-key way is always effective. We hope he will not object to the term "old reliable" -- he has been that in Lima, and more.

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Continuation of Comments of Reviewing Officer

first instance he was bilingual and could fade into the Lima background. But he would not have been so regarded if he had not shown ample good sense, zeal, and balanced judgment in unfamiliar situations. We hope Subject can get overseas again within a reasonable time and consider that the Station that gets him will be fortunate.

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CONFIDENTIAL

FITNESS REPORT				NOTE: Supervisor or Reviewing Official may assign a higher classification if CONFIDENTIAL is not adequate for the report when completed.			
SECTION A. GENERAL INFORMATION							
1. EMPLOYEE NUMBER 036130		2. NAME (last, first, middle) Flores, Daniel		3. DATE OF BIRTH 4 Aug 35		4. SEX M	5. GRADE GS11
6. SD D		7. OFFICIAL POSITION TITLE Operations Officer		8. OFF/DIV/BR OF ASSIGNMENT DDO/WH/3		9. CURRENT STATION Lima, Peru	
10. TYPE OF APPOINTMENT				11. TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> PROVISIONAL	<input type="checkbox"/> RESERVE	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> 21 MONTH	<input type="checkbox"/> 30 MONTH	<input type="checkbox"/> REASSIGNMENT	<input type="checkbox"/> SPECIAL
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL*	<input type="checkbox"/> TEMPORARY	12. REPORTING PERIOD (From-to) 1 July 1972-31 May 73		13. DATE REPORT DUE IN O.P.		
SECTION B. PERFORMANCE EVALUATION							
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-Strong Performance is characterized by exceptional proficiency.</p> <p>O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 Station officer responsible for operations against the MPCHEEK target.						RATING LETTER S	
SPECIFIC DUTY NO. 2 Handler for sensitive unilateral penetration of the Revolutionary Government						RATING LETTER O	
SPECIFIC DUTY NO. 3 Supervise principal agent						RATING LETTER S	
SPECIFIC DUTY NO. 4 Miscellaneous operational support activity, including direction of a unilateral surveillance team.						RATING LETTER S	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular knowledge or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER S	

FORM 45N

CONFIDENTIAL

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CONFIDENTIAL

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide background for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</p> <p>Following realignment of Station officer assignments last year, Subject was given the responsibility for operations against the MPCHEEK "hard target". He also assumed additional tasks in more traditional areas, such as coverage of the local government, penetration of the Communist Party, and press placement activity. The breadth of these operational commitments attests Subject's professional ability and versatility. (This would be a senior case officer's load by any description and Subject's performance at it was the reason behind our recommendation for accelerated promotion last year.)</p> <p>Particularly against the difficult MPCHEEK target, this officer has displayed admirable determination despite the inherent frustrations and disappointments of working against this remote and suspicious group. During the period under review, his job has been the more difficult since the MPCHEEKs, in all probability reacting to a Station attempted recruitment operation (in which Subject played a major role), have withdrawn into a defensive shell which makes access operations verge on the impossible. Nevertheless, he has continued to probe their defenses, and has managed to develop two leads which, with the exercise of patience and application of his proven operational resources, could eventually give us access to the official MPCHEEK Mission here. This officer refuses to become discouraged, a quality officers working on hard targets must have.</p> <p>Special mention is made of Subject's successful bid to make recontact and establish regular meetings with a valuable penetration of the revolutionary government. The agent had broken contact with his former handler in the belief that such action was dictated by his security situation. Our choice of Subject to attempt to recontact this asset was dictated by his experience in dealing with skittish Latins and our belief that Subject could bring it off with tact. reading the situation /CONTINUED/</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
28 June 1973	/s/ Daniel Flores		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
20			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
28 June 1973	Deputy Chief of Station	/s/ Thomas J. Keenan	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>As described, this officer is a steady and solid performer who carries a major case load securely, productively, and without complaint. He has even volunteered to take on additional work when he has seen opportunities to help the Station's overall mission. Because he blends in well on the local scene, he is often drafted for all kinds of ad hoc operational work. This is invariably well done. He is operationally aggressive but also shows lively awareness of the tricky operational climate here and does not push beyond what the traffic will bear. His agents respect his seriousness, which permits him to get more utility out of them. He is a pillar of this Station.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
2 July 1973	Chief of Station	/s/ Richard S. Welch	

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Section C continued.....

as it developed, and make appropriate on-the-spot adjustments to control the asset's reactions. All this had to be accomplished with great regard to security because of the sensitive position occupied by the agent. Subject's performance has been effective and, given the operation's importance, can really be called outstanding. The agent is again a prime source on the radical sector of the government, which is crucial to developments locally.

Further, this officer continues to manage an outside principal agent who in turn handles leftists, Communist Party and press placement assets, so directing these efforts that they contribute effectively to overall Station objectives. More recently, Subject has taken over the unilateral deployment of a new audio operation targetted against a senior local Communist Party official and is carrying it through successfully. This officer also handles much of the support requirements for his various operations, including management of safehouse keepers, overseeing a small surveillance team, and acquisition of rental cars and property in alias. There is little doubt that some of Subject's success can be attributed to his Latin background and fluent Spanish. But both of these advantages might be wasted by a less capable all-round officer. In his case, they provide him with complementary skills that enhance his superior performance. In the view of the reporting officer, Subject carries more than his own share here in Lima in a manner normally calling for an officer of considerably more senior grade and experience.

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(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				036130			
SECTION A - GENERAL							
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH		3. SEX		4. GRADE 5. SD	
Flores Daniel		4 Aug 1935		M		GS-11 D	
6. OFFICIAL POSITION TITLE				7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Ops Officer				DDP/WH/3		Lima	
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY				<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR			
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)				<input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE			
SPECIAL (Specify):				SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
31 August 1972				24 September 1971 - 30 June 1972			
SECTION B - PERFORMANCE EVALUATION							
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-Strong Performance is characterized by exceptional proficiency.</p> <p>O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1						RATING LETTER	
Direction of and administrative support for three outside principal agents whose efforts he directs against the Communist Party, extreme left and labor targets						S	
SPECIFIC DUTY NO. 2						RATING LETTER	
Coordinator of all Station operations against the left, including management of the project covering this activity.						S	
SPECIFIC DUTY NO. 3						RATING LETTER	
Case officer in charge of the Station's labor reporting assets.						P	
SPECIFIC DUTY NO. 4						RATING LETTER	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 10px auto;"> EXEMPT FROM RECENT DECLASSIFICATION OF E.O. 11652, 1 FEB 61 S 55(1) (C) AUG 71 </div> <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 10px auto;"> IMPDET (VARIABLE DECLASSIFICATION, REPORT DATE OF 31 AUG 71) </div>							
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							RATING LETTER
							S

SECRET

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</p>			
<p>In the period of this report, Subject established himself and his family at this post and undertook the direction of the Station's operations against the subversive left which had formerly been handled by an officer two grades senior to Subject. He has proved equal to the task. He learned his new assignment rapidly and adapted well to the handling of his cases through outside principal agents, a security requirement of the local scene which can be frustrating for an aggressive officer with fluent Spanish such as Subject. However, he has shown maturity and superior handling ability in directing his assets against the subversive left and particularly the Communist labor union. His intimate knowledge of the extreme left enabled him to plan secure contact with a "walk-in" to the Embassy who at first appeared genuine. After thoroughly debriefing this individual, drawing upon his knowledge of the extreme left, Subject was able to recommend no continuing contact with him due to specific fabrications on the part of the walk-in.</p> <p>He is careful in management of funds entrusted to him for his operations and provides required administrative and operational reports in a timely manner. There have been past comments on Subject's weakness in writing. He has worked hard on this, and the rating officer feels that he is now competently producing the reports required. Subject understands that this is an area that requires continuing attention for a growing professional.</p> <p style="text-align: right;">/CONTINUED/</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
15 August 1972	/s/ Daniel Flores		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
10			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
15 August 1972	Deputy Chief of Station	/s/ Thomas J. Keenan	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>Subject has come up the hard way, both in pushing on to finish his education and in BKTRUST. As a result he is way under-graded for his maturity and for his operational contributions. That we have given Subject a major responsibility here (STPAGODA) attests to how much confidence we have in him and his ability. He is, of course, bi-lingual and mixes well with Latins, an advantage he uses well. A good "street" operator, he still has a way to go in organizing his paper work and in relating to HQ needs.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
15 August 1972	Chief of Station	/s/ Richard S. Belch	

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SECTION C continued.....

A comment must be made on Subject's great ability to adjust rapidly to one-time and target of opportunity assignments. His performance in meeting with two high level agents of other stations who had to be met during stays in Peru, and his on-site assistance in an audio operation against a priority target have been of the highest order. No doubt his fluent Spanish greatly assisted him in these tasks, but his experience and good judgment were major factors in his excellent performance in the role of utility operations officer.

To exploit Subject's talents to the fullest, and provide him with the professional challenge equal to his ability, he has now been assigned the management and handling of the difficult Chinese target, a top priority for the Station. This is a true measure of our confidence in him.

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 036139	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) Flores, Daniel			2. DATE OF BIRTH 08/04/35	3. SEX M	4. GRADE 5. SD GS-10 D
6. OFFICIAL POSITION TITLE Ops Officer			7. OFFICER OF ASSIGNMENT DDP/WH/3		8. CURRENT STATION Hq
9. CHECK TYPE OF APPOINTMENT			10. CHECK TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P. 31 October 1971			12. REPORTING PERIOD (From - to) 1 May 1971 - 30 September 1971		
SECTION B PERFORMANCE EVALUATION					
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-Strong Performance is characterized by exceptional proficiency.</p> <p>O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					RATING LETTER
SPECIFIC DUTY NO. 1					RATING LETTER
SPECIFIC DUTY NO. 2					RATING LETTER
SPECIFIC DUTY NO. 3					RATING LETTER
SPECIFIC DUTY NO. 4					RATING LETTER
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER

SECRET

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</p>			
<p style="text-align: center;">AUG 17 2 17 PM '71</p> <p>Mr. Daniel Flores completed his first tour in Guayaquil and departed the field on 28 May 1971. Following home leave, Mr. Flores returned to Headquarters in August for approximately two months training prior to his next assignment to Lima, Peru. This training included Weapons Familiarization and Defensive Driving, CA, China and Labor Ops. Communist Party, TSD briefings, and on-the-desk Reports Writing Familiarization.</p> <p>Since Mr. Flores has been on leave or training status for most of this reporting period, no meaningful rating can be given.</p>			
SECTION D			
CERTIFICATION AND COMMENTS			
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
	employee in training		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
16 August 1971	WH/Personnel Officer	John Forgyon	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL TYPED OR PRINTED NAME AND SIGNATURE		

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				036130			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH		3. SEX	4. GRADE	5. SI	
Flores, Daniel		4 Aug 1935		M	III-10	D	
6. OFFICIAL POSITION TITLE		7. OFF. OR BR. OF ASSIGNMENT		8. CURRENT STATION			
Ops Officer		DDP/NH/3		Guayaquil			
9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT					
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY		<input type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify):		<input type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> REASSIGNMENT EMPLOYEE			
11. DATE REPORT DUE IN O.P.		12. REPORTING PERIOD (From - to)					
		1 October 1970/30 April 1971					
SECTION B PERFORMANCE EVALUATION							
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-Strong Performance is characterized by exceptional proficiency.</p> <p>O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1						RATING LETTER	
Case Officer responsible for a Base project targetted against the subversive left.						S	
SPECIFIC DUTY NO. 2						RATING LETTER	
Case Officer responsible for a sensitive technical operation including the selection of intelligence resulting from the operation.						O	
SPECIFIC DUTY NO. 3						RATING LETTER	
Development of new agent assets.						P	
SPECIFIC DUTY NO. 4						RATING LETTER	
Preparation of dispatches, intelligence reports and other correspondence pertinent to his area of responsibility.						P	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER	
						S	

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</p> <p>There has been little change in Subject's performance since the submission of his last report covering the period through 30 September 1970.</p> <p>The highpoint of his activities during this period, as it has been throughout his tour, has been his management of a sensitive technical operation which has been a consistent producer of unique and high level intelligence. This has been a good performance on Subject's part indicative of his professional capability to conduct clandestine operations.</p> <p>Subject's writing ability has improved during this period, and there is little doubt that his efforts in this regard are paying off. Further experience should see continued improvement of his writing skills.</p> <p>As Subject's first tour comes to a close he can look back on a generally strong performance in all phases of his operational activity on behalf of the Base's objectives.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
3 May 1971	/s/ Daniel Floros		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
20			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
3 May 1971	COB, Guayaquil	/s/ Robert Farbrini	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>I concur in the ratings and remarks of the supervisor. During his first tour abroad, Subject has done very well in his main fields of activity. His outstanding attribute at the moment is his persistence not only in going after operational targets but also in improving himself. He has encountered some difficulty in presenting his ideas in written form but he has faced up to this problem and, as the rating officer notes, has made significant improvement.</p> <p>(Continued)</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
17 May 71	COS, Quito	/s/ Paul V. Harwood	

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Continuation of Comments by Reviewing Official

Subject has a clear-headed approach to the collection of intelligence and is realistic in evaluating potential sources. His fluency in the Spanish language has facilitated his movement in the local community and he has developed several potentially useful sources and identified others.

In considering this officer for promotion, two facts should be kept in mind:

a. He is probably older and certainly more mature than the average officer at his grade level. He is anxious to get ahead and this explains much of his initiative and drive.

b. The rating officer has rated him very realistically which, in my view, adds to the importance of the outstanding rating given him on Specific Duty No. 2.

SECRET

C-O-N-F-I-D-E-N-T-I-A-L

TRAINING REPORT

Weapons Training/Defensive Driving Course No. 1/72

2-6 August 1971

Date

TRAINEE: FLORES, Daniel

OFFICE: WH

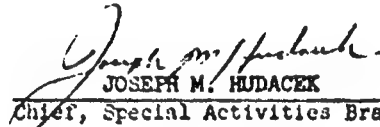
PURPOSE AND SCOPE OF COURSE:

The course provides basic proficiency training in the use of weapons for self-defense and in the techniques of defensive driving to counter vehicular kidnaping for Agency officers being assigned to hostile or unstable political and operational environments abroad.

ACHIEVEMENT RECORD:

This is to certify that Mr. Flores has satisfactorily completed the prescribed course of instruction.

FOR THE DIRECTOR OF TRAINING:


JOSEPH M. HUDACEK
Chief, Special Activities Branch

9 August 1971

Date

C-O-N-F-I-D-E-N-T-I-A-L

14-00000

Certification of Handgun Qualification

9 August 1971

Date

Mr. Frederick E. Owens and
(Instructor SAB Staff, OTG, ISOLATION)
Identity

Trainee FLORES, Daniel, WH
Identity

on 2-6 August, Mr. Flores was given 28 hours
date identity

instruction in firing techniques, weapon care and safe weapons handling

procedures. Subsequently Mr. Flores fired the handgun qualifica-
identity

tion course with Automatic (Cal. - 9mm) 258
Revolver (Cal. 38) achieving a score of 261 out
weapon

of a possible 300. Mr. Flores demonstrated that he
identity

had absorbed the instruction on safe weapon handling and that he exercises

due care and discretion. Accordingly Mr. Flores is certified as
identity

Automatic (Cal. - 9mm)
qualified with the Revolver (Cal. - 38) as of this date.
weapon

Signed

Fred E. Owens
FREDERICK E. OWENS, SAB/OTG
Instructor Identity

S E C R E TContinuation of Narrative Comments

the target is good. The project is, however, in need of good human reporting assets and it is expected that as Subject overcomes a weakness mentioned in the next paragraph he will be able to devote more of his time to this important task.

The Subject has encountered some difficulty in the preparation of written material -- dispatches, intelligence reports -- and finds it necessary to spend an extended portion of his time on its preparation. The rater has discussed this with Subject on several occasions, and it is believed that his difficulty is due to a lack of experience, and that in time and with a continuing effort on his part he will develop his writing skills.

The Subject's overall attitude and response towards his professional responsibilities during the first tour have been positive. He is interested in the kind of work he is doing, likes it and is willing to put in the kind of long hours it sometimes demands without complaint.

Continuation of Comments of Reviewing Official

of the Base. He responds positively to guidance and direction; he is eager for new opportunities to enlarge his experience and knowledge. He appears to be completely motivated toward the work of this organization; it is a pleasure to have him in Guayaquil.

S E C R E T

Classified by 100-100-100

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

The period covered by this report encompasses the middle portion of the Subject's first tour as a Case Officer. His performance during this period has been balanced in that he has shown the kind of intelligence and maturity necessary to successfully carry out clandestine operational activity. He has also shown a weakness which he will need to overcome in order to achieve his full operating potential.

The Subject has turned in fine performance in the overall management of a very important and sensitive audio operation which has been under his care since the pre-installation phase. His sure and careful handling of all succeeding phases of this operation led to a secure, uncomplicated installation, the recruitment and training of support agents, and the dissemination of valuable intelligence information. Subject's natural fluency in the Spanish language has been especially useful in this operation. His handling of this installation has been of a high professional caliber throughout.

The Subject is also responsible for the management of a project targetted against the subversive left. His handling of this project has been good: he is a good agent handler; knows how to target his assets against objectives of most importance; and, his knowledge of

(Continued)

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

30 Oct. 1970

SIGNATURE OF EMPLOYEE

/s/ Daniel Flores

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

30 Oct. 1970

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

Robert L. Fambriani /s/

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I agree with the ratings. This has been a good year for Subject, one which has given him a rather unusual opportunity to learn many facets of the work of this organization and one in which he has shown a very satisfactory level of accomplishment. Shortly after his arrival in Guayaquil he became, for a short time, the Acting Chief of Base, and through that period and the ensuing change in Base Chiefs, he showed a professional maturity we felt to be exceptional for a young officer on his first tour. He has worked hard and intensely for improvement in the quantity and quality of his operational production, and he has collaborated very effectively with the other officers

(Continued)

30 Oct. 1970

CDS

John D. Nelson

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				036120	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SS
Flores, Daniel		4 Aug 1935	M	GS-16	n
6. OFFICIAL POSITION TITLE		7. OFFICE/UNIT OF ASSIGNMENT		8. CURRENT STATION	
Ops Officer		DDP/WH/Branch 3		(Signature)	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR		
<input type="checkbox"/> CAREER-PROVISIONAL (See instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
SPECIAL (Specify):			SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			1 October 1969 - 30 September 1970		
SECTION B PERFORMANCE EVALUATION					
U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C. M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described. P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected. S-Strong Performance is characterized by exceptional proficiency. O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1					RATING LETTER
Case Officer responsible for Base project targetted against the subversive left					S
SPECIFIC DUTY NO. 2					RATING LETTER
Case Officer responsible for a sensitive audio operation including the selection of the intelligence resulting from the operation					S
SPECIFIC DUTY NO. 3					RATING LETTER
The development of new agent assets and operations					P
SPECIFIC DUTY NO. 4					RATING LETTER
Preparation of dispatches, intelligence reports and other correspondence pertinent to the operation in his area of responsibility					P
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct, job experience, personal potential, and other factors. Based on your knowledge of employee's overall performance during the rating period place the letter in the rating box corresponding to the level which most accurately reflects his level of performance.					RATING LETTER
					S

SECRET

SECRET

Section C

Narrative Comments, Cont'd

disciplined, effective manner enabling him to maintain a continuity and productivity within the Base operational requirements with security and dispatch.

Socially Subject and his wife are proving to be good mixers and both are gaining in popularity within the local foreign and indigenous communities. They both have gained the respect and appreciation of the complex not only as compatible personalities, but in her willingness to participate actively in joint charitable endeavors and his professional cooperative attitude. Their optimistic and positive conduct at official and non-official functions is a credit to the Base.

Subject's native fluency in Spanish and his Latin background is proving to be a definite asset in the performance of his assigned operational tasks and ability to handle agent assets amicably and productively.

He maintains accurate accounting records and is demonstrating responsible acute cost consciousness in the use of funds and properties.

This rater's principal criticism of this employee is his tendency toward impulsiveness and too-quick judgement before weighing all the facts and implications in the pursuit of his operational requirements; however, this weakness is more a function of his inexperience in the field and will be resolved as he gains more field experience.

Subject, although exhibiting resourcefulness and imagination in performing his assigned operational tasks also has a tendency to accept the judgement of other senior grade officers too readily rather than express his own convictions and trust in his own assessment of a situation.

This rater has counseled this Officer regarding these tendencies and he is taking measures to rectify them.

In judging his over all performance, this Rater is of the opinion if he continues to apply himself in handling tasks worthy of a senior grade officer, he should be considered for a promotion to the GS-10 level at the earliest opportunity.

RYBAT
SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 036130	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) Florch, Daniel			2. DATE OF BIRTH 8-11-35	3. SEX M	4. GRADE (11-15)
5. OFFICIAL POSITION TITLE Oph Officer			7. OFF/DIV/BR OF ASSIGNMENT DDP/WH/Br 3	8. CURRENT STATION Guayaquil	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input checked="" type="checkbox"/> CAREER/PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> SPECIAL (Specify): <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - To) 13 May 1969 - 30 September 1969		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					RATING LETTER
SPECIFIC DUTY NO. 1 Case Officer responsible for handling Base operations and assets targetted against hard- and soft-line communist activities in the coastal areas of Ecuador. DE 42					S
SPECIFIC DUTY NO. 2 Case Officer responsible for the handling of three sensitive VEC audio operations. He is also responsible for the translations, processing, and dissemination of the relevant intelligence info. DE 42					S
SPECIFIC DUTY NO. 3 Case Officer of student assets targetted against the extreme leftist elements within student groups. DE 42					P
SPECIFIC DUTY NO. 4 Development of new contacts and operations, including following up operational leads and recruitment pitches. DE 42					P
SPECIFIC DUTY NO. 5 Case Officer responsible for writing his own intelligence disseminations prepared from information obtained from his agent assets. DE 42					P
SPECIFIC DUTY NO. 6 Drafts operational correspondence, Project Renewals, and Progress Reports. DE 42					S
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</p> <p style="text-align: right;">OCT 26 19 40 AM '69</p> <p>This employee, a GS-09, arrived PCS at the Guayaquil Base on 13 May 1969 and has been under this Rater's supervision during this four and one-half month period. Guayaquil is his first overseas assignment with this Agency.</p> <p>During this short reviewing period, this Officer has demonstrated a marked insight and knowledgeableness of the operations he has been assigned, and has provided a number of good ideas and suggestions for the betterment of these operations. Subject is proving to be a hard worker and has not complained of the many extra hours he has devoted to his operations. He has accepted responsibilities without hesitation and is not afraid to take on difficult tasks using initiative and ingenuity in their completion. This latter quality has been amply demonstrated when the Rater was unexpectedly confined to a hospital in the Panama Canal Zone for the full month of August 1969, leaving this employee solely responsible for the Base as the only inside Case Officer at the Base during this time. Rater's absence corresponded with a change in Case Officer PCS assignments at the Base, which left the Base temporarily depleted of Officers. During this period, Subject exhibited an ability and maturity expected of an officer of higher grade and greater field experience. He organized his increased workload in a</p> <p style="text-align: right;">...Continued...</p>			
SECTION D CERTIFICATION AND COMMENTS			
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
2 October 1969	/s/ Daniel Flores		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
2 October 1969	Chief of Base	/s/ Neil Hinckley	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>This Officer has made a most impressive beginning in Guayaquil. He has in a few short months adapted to new tasks and a new environment with mature, if modest, assurance and a professional approach which speaks highly for the training and experience he has had. He has taken on, in the absence of the Chief of Base and other senior officers, responsibilities uncommon to an officer of his junior position, and he has handled them in a superior fashion. He and his wife have entered into their representational responsibilities with great enthusiasm and effectiveness, and I predict a most highly successful tour for him in Ecuador. Because he has shown a personal and professional competence beyond his grade level, it is strongly recommended that he be considered for promotion to GS-10 at the earliest opportunity.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
16 October 1969	Chief of Station	/s/ John S. Morgan	

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				036130	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE
Flores Daniel			4 Aug 1935	M	GS-08
5. OFFICIAL POSITION TITLE			6. OFF/DIV/RR OF ASSIGNMENT		
OPH Officer			DDP/WH/4		
7. CHECK (X) TYPE OF APPOINTMENT			8. CURRENT STATION		
CAREER RESERVE TEMPORARY			HQS		
CAREER-PROVISIONAL (See Instructions - Section C)			ANNUAL		
SPECIAL (Specify)			XX REASSIGNMENT SUPERVISOR		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			19 September 1968 - 30 April 1969		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).					
SPECIFIC DUTY NO. 1					RATING LETTER
Operations officer handling the Headquarters direction and support of FI projects and activities.					S
SPECIFIC DUTY NO. 2					RATING LETTER
Preparation of operational correspondence, dispatches, cables and special memoranda.					P
SPECIFIC DUTY NO. 3					RATING LETTER
Coordination of operational matters with other components and desks.					P
SPECIFIC DUTY NO. 4					RATING LETTER
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
13 MAY 1969					
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					P

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p><small>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</small></p> <p>Mr. Flores did a fine job while he was assigned to the Chile desk. He had responsibility for a variety of FI projects, including several complex and sensitive ones, which he ably handled. He had a full workload and in addition to his assigned responsibilities he was given FI assignments of every type as they arose. On one occasion he was sent on an operational trip to New York City where he was to contact, assess and support a target personality. Owing to circumstances beyond his control nothing went as expected but Mr. Flores, acting alone, improvised and adapted to the situation. This is indicative of the initiative and eagerness he displayed in his desk work. He was willing to learn and he accepted guidance and instruction to the letter. In addition Mr. Flores writes well and this is always an asset.</p> <p>Mr. Flores is fluent in Spanish. It is my impression that if there is one thing that Mr. Flores wants to be that is a field case officer. He is now getting that chance. He will soon leave on an assignment to Ecuador. I have no doubt that he will do very well.</p> <p>Mr. Flores did not have any managerial duties.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
<small>I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT</small>			
DATE <i>April 28, 1969</i>	SIGNATURE OF EMPLOYEE <i>[Signature]</i>		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 5 months	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
DATE <i>28 April 69</i>	OFFICIAL TITLE OF SUPERVISOR C/WH/4/Chile	TYPED OR PRINTED NAME AND SIGNATURE <i>[Signature]</i> Robert Wiccha	
3. BY REVIEWING OFFICIAL			
<p>COMMENTS OF REVIEWING OFFICIAL</p> <p align="center" style="margin-top: 20px;">I concur in the above assessment.</p>			
DATE 29 April 1969	OFFICIAL TITLE OF REVIEWING OFFICIAL Chief, WH/4	TYPED OR PRINTED NAME AND SIGNATURE <i>[Signature]</i> Raymond A. Warren	

SECRET

STANDARDIZATION OF ALL REPORTS (1968)

1. NAME (LAST) (FIRST) (MIDDLE) (Employee
Serial No.)

FLORES, Daniel 07 036130
2. DATE REPORT MADE (OF) REPORTING PERIOD
30 November 1968 17 December 1967 - 31 October 1968

3. This career trainee has been assigned in course of the Integrated Program with assignment training in Clandestine Operations.

Detailed evaluations of his performance in each phase are contained in his Official Personnel Folder. Definition of the rating letter corresponds to that in Section B, Progress Report Form 4b (4-65).

OVERALL PERFORMANCE IN INTEGRATED PROGRAM Proficient

4. COMMENT AND RELEVANT OBSERVATIONS.

Mr. Flores entered the CT Program on 11 December 1967, sponsored by DDP/WH Division. His work during formal training was characterized by determination, hard work, and a strong ambition to become a successful Clandestine Services operations officer. He responded well to supervision and guidance and experienced no difficulties in assimilating the principles and techniques covered by the instruction. In Operations Course Phase I, the key course for DDP case officers, he achieved an overall performance rating of HIGH PROFICIENT.

At the previous request of his Division Chief, Mr. Flores was, effective 10 October 1968, reassigned to DDP/WH Division.

27 NOV 1968
at

25 November 1968

John Gerry
John Gerry

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				030130	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE 5. SD
FLORES, Daniel			4 Aug 35	M	GS-05 D
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT 8. CURRENT STATION		
Intel Clerk			DDP/WH/COG WASH., D.C.		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR		
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
<input type="checkbox"/> SPECIAL (Specify)			<input checked="" type="checkbox"/> SPECIAL (Specify) Recommendation for Promotion		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			1 February 1967-15 June 1967		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1					RATING LETTER
Performs intelligence operations support work in connection with Cuban CI operations in third countries. Assembles lead files, DEAF collates data on hand and additions information received in preparation for target analysis.					S
SPECIFIC DUTY NO. 2					RATING LETTER
Screens Cuban Spanish language publications for information of value in the branch counter espionage-counter intelligence records and for operational data.					S
SPECIFIC DUTY NO. 3					RATING LETTER
Conducts liaison between two contract agents and WH/COG/CICS and maintains the administrative records for these cases.					P
SPECIFIC DUTY NO. 4					RATING LETTER
Prepares translations from Spanish to English and English to Spanish of operational correspondence.					P
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					S

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of important or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</p>			
<p>Mr. Flores is a part-time staff employee who works a maximum of 19½ hours per week while attending university full-time. In August 1967 he will obtain his bachelor's degree in political science. He will revert to full-time employment upon finishing his university studies and will be recommended to the Office of Training for admission in the CT class beginning November 1967.</p> <p>The limitations imposed by part-time employment have prevented us from assigning Mr. Flores to jobs within the branch such as the monitoring of active field cases which require close, daily attention. However, he is qualified for this type of duty. His performance in the duties described above is excellent. He accomplishes his tasks quietly and efficiently with a minimum of guidance from his supervisor. Because he is bi-lingual in Spanish and English he is of great use to the Branch in screening quickly and accurately materials which are of counter-intelligence interest.</p> <p>Mr. Flores agency work background, coupled with his formal education about to be completed and his own desire to make a career in intelligence make him an extremely valuable employee, one in whom the Agency should not hesitate to invest time and money for the advancement of his career training.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1.		BY EMPLOYEE	
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
June 14, 1967	<i>[Signature]</i>		
2.		BY SUPERVISOR	
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
	DC/WH/COG/CICS	<i>[Signature]</i> Carl Trottin	
3.		BY REVIEWING OFFICIAL	
COMMENTS OF REVIEWING OFFICIAL			
<p>I would rate Mr. Flores essentially the same as Mr. Trottin. I wish to stress that, although young and inexperienced in intelligence work at the present time, the potential is certainly there. After CT training Mr. Flores should be a fine, dedicated and competent officer.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
	CAWH/COG/CICS	<i>[Signature]</i> Barry Mahoney	

SECRET

SECRET
(When Filled In)

FITNESS REPORT			EMPLOYEE SERIAL NUMBER	
			036130	
SECTION A GENERAL				
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE
Flores Daniel		4 Aug 35	M	GS-05 D
5. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT		
Intel Clerk		DDP/WH/COG		
9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):		<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.		12. REPORTING PERIOD (From - to)		
		1 April 66 - 31 Jan 67		
SECTION B PERFORMANCE EVALUATION				
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>				
SPECIFIC DUTIES				
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).				
SPECIFIC DUTY NO. 1				RATING LETTER
Conducts liaison between two contract agents and WH/COG/CICS				P
SPECIFIC DUTY NO. 2				RATING LETTER
Maintains files and handles administrative matters for these same two contract agents, including travel, housing, payments, etc.				P
SPECIFIC DUTY NO. 3				RATING LETTER
Prepares translations from Spanish to English and from English to Spanish				S
SPECIFIC DUTY NO. 4				RATING LETTER
Prepares material for input for the CUIS Machine Program				P
SPECIFIC DUTY NO. 5				RATING LETTER
SPECIFIC DUTY NO. 6				RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION				
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.				RATING LETTER
				P

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS.

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Apply all standards given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

JAN 30 10 48 AM '67

Mr. Flores has continued to perform at the same proficient level cited in his previous fitness report. The ratings and remarks appended to this report, accordingly, still remain applicable.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
	<i>[Signature]</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
5 months		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
26 January 67	Chief, WH/COG/CICS	<i>[Signature]</i> Harry T. Mahoney
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
Mr. Flores turns in a good piece of finished work and has demonstrated increasing ability as a Case Officer. As soon as he graduates I plan to recommend him for CT training. I have discussed the matter with him and he plans to make a career with the Agency which will be mutually advantageous to him and the Agency.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
30 Jan 67	Deputy Chief, WH/COG	<i>[Signature]</i> Earl Williamson

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A				GENERAL	
1. NAME (Last) (First) (Middle) FLORES, Daniel		2. DATE OF BIRTH 4 Aug 35		3. SEX M	
4. OFFICIAL POSITION TITLE Intelligence Asst.		5. GRADE GS-05		6. SD D	
7. OFF/DIV/BR OF ASSIGNMENT DDP/WH/C		8. CURRENT STATION Washington D.C.			
9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT			
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):		<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> REASSIGNMENT EMPLOYEE			
11. DATE REPORT DUE IN O.P. 30 April 1966		12. REPORTING PERIOD (From - to) 1 April 65 - 31 March 66			
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Conducts liaison between two contract agents and WH/COG/CICS					RATING LETTER P
SPECIFIC DUTY NO. 2 Maintains files and handles administrative matters for these same two contract agents, including travel, housing, payments, etc.					RATING LETTER P
SPECIFIC DUTY NO. 3 Prepares translations from Spanish to English and from English to Spanish					RATING LETTER S
SPECIFIC DUTY NO. 4 Prepares material for input for the CUIS Machine Program					RATING LETTER P
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER P

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of major or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. <i>Dec 2 11 30 PM '66</i></p>			
<p>Mr. Flores is a part-time staff employee who works a minimum of nineteen hours per week; he is also a full time college student in his senior year, majoring in political science and specializing in Latin American studies. Subsequent comments should be prefaced by the statement that Mr. Flores' overall performance of his assigned duties would be considerably more efficient if he were able to devote full time to his assignment. On the other hand, Mr. Flores is preparing himself academically for a useful career with the Agency and in the rater's opinion shows promise of becoming a very capable and competent officer.</p>			
<p>Mr. Flores is bilingual and has served very efficiently as a translator for the Branch. He has gained very valuable experience as a case officer in the handling of two contract agents of WH/COG/CICS and in doing so has demonstrated tact, sound judgment and a fine ability to handle people. Mr. Flores is very personable, intelligent and makes an excellent appearance. With the completion of his studies he should be able to make the transition from Intelligence Assistant to Junior Case Officer, which the rater heartily recommends.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
30 November 1966	<i>[Signature]</i>		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
11 months			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
30 November 66	DC/WH/COG/CICS	<i>[Signature]</i> John A. Castoro	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>Mr. Flores has worked closely under my direct supervision in the handling of the two contract employees listed under Specific Duty No. 1 and 2. I concur with the rating of Mr. Castoro and can only emphasize that I believe Mr. Flores will make a good Case Officer and I plan to recommend him for CT status as soon as he is able to be with us full time.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
30 Nov 1966	Chief, WH/COG/CICS	<i>[Signature]</i> Harry T. Mahoney	

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) FLORES, Daniel		2. DATE OF BIRTH 4 Aug 35	3. SEX M	4. GRADE GS-05	5. SD D
6. OFFICIAL POSITION TITLE Intel Clerk		7. OFF/DIV/BR OF ASSIGNMENT DDP/WH/COG		8. CURRENT STATION WASH., D.C.	
9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT			
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY		<input type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> SPECIAL (Specify) Recommendation for Promotion			
11. DATE REPORT DUE IN O.P.		12. REPORTING PERIOD (From - to) 1 February 1967-15 June 1967			
SECTION B PERFORMANCE EVALUATION					
W - Weak		Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.			
A - Adequate		Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.			
P - Proficient		Performance is more than satisfactory. Desired results are being produced in a proficient manner.			
S - Strong		Performance is characterized by exceptional proficiency.			
O - Outstanding		Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.			
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					RATING LETTER
SPECIFIC DUTY NO. 1 Performs intelligence operations support work in connection with Cuban CI operations in third countries. Assembles lead files, collates data on hand and additions information received in preparation for target analysis.					S
SPECIFIC DUTY NO. 2 Screens Cuban Spanish language publications for information of value in the branch counter-espionage-counter intelligence records and for operational data.					S
SPECIFIC DUTY NO. 3 Conducts liaison between two contract agents and WH/COG/CICS and maintains the administrative records for these cases.					P
SPECIFIC DUTY NO. 4 Prepares translations from Spanish to English and English to Spanish of operational correspondence.					P
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					S

SECRET

(When Filled In)

SECTION C			NARRATIVE COMMENTS		
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manager of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</p>					
<p>Mr. Flores is a part-time staff employee who works a maximum of 19 1/2 hours per week while attending university full-time. In August 1967 he will obtain his bachelor's degree in political science. He will revert to full-time employment upon finishing his university studies and will be recommended to the Office of Training for admission in the CT class beginning November 1967.</p> <p>The limitations imposed by part-time employment have prevented us from assigning Mr. Flores to jobs within the branch such as the monitoring of active field cases which require close, daily attention. However, he is qualified for this type of duty. His performance in the duties described above is excellent. He accomplishes his tasks quietly and efficiently with a minimum of guidance from his supervisor. Because he is bi-lingual in Spanish and English he is of great use to the Branch in screening quickly and accurately materials which are of counter-intelligence interest.</p> <p>Mr. Flores agency work background, coupled with his formal education about to be completed and his own desire to make a career in intelligence make him an extremely valuable employee, one in whom the Agency should not hesitate to invest time and money for the advancement of his career training.</p>					
SECTION D			CERTIFICATION AND COMMENTS		
1. BY EMPLOYEE					
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT					
DATE	SIGNATURE OF EMPLOYEE				
June 14, 1967	<i>[Signature]</i>				
2. BY SUPERVISOR					
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION				
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE			
	DC/WH/COG/CICS	<i>[Signature]</i> Carl Trettin			
3. BY REVIEWING OFFICIAL					
COMMENTS OF REVIEWING OFFICIAL					
<p>I would rate Mr. Flores essentially the same as Mr. Trettin. I wish to stress that, although young and inexperienced in intelligence work at the present time, the potential is certainly there. After CT training Mr. Flores should be a fine, dedicated and competent officer.</p>					
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE			
	C/WH/COG/CICS	<i>[Signature]</i> Harry Mahoney			

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				036130	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) FLORES, Daniel			2. DATE OF BIRTH 4 Aug 35	3. SEX M	4. GRADE GS-05
			5. SD D		
6. OFFICIAL POSITION TITLE Intelligence Asst.			7. OFF/DIV/BR OF ASSIGNMENT DDP/SAS		8. CURRENT STATION Washington D.C.
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			<input checked="" type="checkbox"/> INITIAL <input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P. 30 April 1965			12. REPORTING PERIOD (From - to) 1 January 1964 - 31 March 1965		
SECTION B PERFORMANCE EVALUATION					
W - Weak		Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.			
A - Adequate		Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.			
P - Proficient		Performance is more than satisfactory. Desired results are being produced in a proficient manner.			
S - Strong		Performance is characterized by exceptional proficiency.			
O - Outstanding		Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.			
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Served as interpreter for WH/SA counterintelligence operations officers and Office of Communications officers in training and briefing agents being prepared for dispatch to denied area (Cuba). <div style="text-align: right;">DE62</div>					RATING LETTER S
SPECIFIC DUTY NO. 2 Assisted in the debriefing of a Cuban intelligence service defector. <div style="text-align: right;">DE32</div>					RATING LETTER P
SPECIFIC DUTY NO. 3 Translated and participated in the preparation of agent S/W messages, cover letters, and OWVL messages. <div style="text-align: right;">DB63</div>					RATING LETTER P
SPECIFIC DUTY NO. 4 Performed traces and research relating to counterintelligence operations and activities. <div style="text-align: right;">DC30</div>					RATING LETTER S
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or expand points given in Section B to provide basis for determining future personnel action. <u>Manner of performance of managerial or supervisory duties must be described, if applicable.</u></p>			
<p>Mr. Flores was a particularly useful and versatile employee in the WH/SA counterintelligence operations unit. Although he had no operational training or previous operational experience, he learned rapidly and performed well the operational support type duties assigned to him. His fluent knowledge of the Spanish language, his willingness to learn and perform tedious tasks, and his conscientious approach to his work were important factors in his performance. His previous assignments in the RI Division and in WH/SA as a translator and in conducting name traces gave him a good background.</p>			
<p>With respect to specific duty #3, on two separate operations in New York City Mr. Flores participated in the training and preparation of agents for dispatch to Cuba. In the first operation he interpreted for training in S/W, OWVL, W/T (medium speed) and related subjects. The second operation involved OWVL only. This experience enable Mr. Flores to perform duties (specific duty #3.) relating to communications with agents in Cuba.</p>			
<p>Mr. Flores plans to continue his university education and attain a degree. Arrangements have been completed so that he may work in the Agency on a part time basis beginning in January 1965. He will attend classes at a local university as a full time student.</p>			
<p>Mr. Flores was promoted from GS-04 to GS-05 on 16 March 1964. He has been performing duties at the GS-06 level, and he should be promoted.</p>			
<p>(see page two)</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
6 April 1965	<i>[Signature]</i>		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
15 months			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
6 April 1965	C/WH/SA/CI Ops (WH/C/RR/OS)	<i>[Signature]</i> Richard Tansing	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
Concur.			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	SIGNATURE OF REVIEWING OFFICIAL	
4-1-65	C. WH SA CI (WH C SP)	<i>[Signature]</i> Harold F. Swenson	

SECRET

SECRET

- 2 -

Mr. Flores is cost conscious and effective in the use of space, equipment and funds.

Mr. Flores does not hold a supervisory position.

SECRET

SECRET

(When Filled In)

FITNESS REPORT			EMPLOYEE SERIAL NUMBER	
SECTION A 1. NAME (Last) (First) (Middle) FLORES Daniel			GENERAL 2. DATE OF BIRTH 4 Aug. 1935	
3. OFFICIAL POSITION TITLE Translator			3. SEX Male	
4. CHECK (X) TYPE OF APPOINTMENT <input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) SPECIAL (Specify):			4. GRADE 5. SD GS-4 D	
6. DATE REPORT DUE IN O.P.			7. OFF. DIV./RR OF ASSIGNMENT DDP/S.A.S.	
8. CHECK (X) TYPE OF REPORT <input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input checked="" type="checkbox"/> SPECIAL (Specify): Promotion Recommendation			8. CURRENT STATION Washington, D.C.	
10. REPORTING PERIOD (From - to) 10 June 1963 to 6 December 1963				
SECTION B PERFORMANCE EVALUATION				
<p>W - <u>Weak</u> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - <u>Adequate</u> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - <u>Proficient</u> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - <u>Strong</u> Performance is characterized by exceptional proficiency.</p> <p>O - <u>Outstanding</u> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>				
SPECIFIC DUTIES				
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).				RATING LETTER
SPECIFIC DUTY NO. 1 Translates material from Spanish to English and vice-versa. Translates agent messages.				S
SPECIFIC DUTY NO. 2 Performs name traces, analyses, extracts and summarizes obtained information.				P
SPECIFIC DUTY NO. 3 Prepares and initiates requests for operational clearances.				P
SPECIFIC DUTY NO. 4 Writes and prepares dispatches, cables and memoranda.				A
SPECIFIC DUTY NO. 5				RATING LETTER
SPECIFIC DUTY NO. 6				RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION				
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and pertinent limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.				RATING LETTER P

30 DEC 1963

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. <u>Manner of performance of managerial or supervisory duties must be described, if applicable.</u></p>			
<p>Mr. Flores entered on duty with Special Affairs Staff in June 1963. Due to his proficiency in Spanish he was assigned to translating duties and immediately proved to be an invaluable asset to this office as well as to the Staff as a whole. He worked many late hours and weekends helping to facilitate the flow of translations from this office to the different components within SAS. His performance of these duties can best be characterized as "exceptional" in all degrees.</p>			
<p>Mr. Flores expressed a desire to move into a position of greater responsibility and this request was readily granted approximately one month ago. He is currently being trained as an intelligence assistant in Ops Support functions and his performance to date has been excellent. In his new duties Mr. Flores requires very little supervision. This can be attributed in part to his degree of intelligence as well as the background he obtained for his present duties while assigned to his previous job in RID/INDEX. Mr. Flores spent approximately one year in his former job and the knowledge he brought with him resulting to name tracing procedures has enabled him to grasp the duties of his new position quite rapidly.</p>			
<p>As a means of furthering his education Mr. Flores is attending American University at night. He has expressed a desire to obtain some agency training and would like very much to be enrolled in the Intelligence Orientation Course as soon as possible.</p>			
<p>Mr. Flores entered the agency as a GS-4 in March 1962. It is strongly recommended that he be promoted at the earliest possible date to a GS-5.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, D, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
17 Dec 1963	Daniel Flores <i>Daniel Flores</i>		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
5 Months			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
17 Dec 1963	CHIEF, SAS/ICS	JOSEPH A. MOUGHAN <i>Joseph A. Moughan</i>	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>I agree with the assessment of the supervisor, concur in his decision to move Mr. Flores into a position of greater responsibility, and I support the recommendation that Mr. Flores be promoted.</p>			
Attached is a formal recommendation.			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
17 Dec 1963	CHIEF, SAS/INTL	JOHN K. KING <i>John K. King</i>	

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				036130	
SECTION A		GENERAL			
1. NAME (Last) (First) (Middle)		6. DATE OF BIRTH	7. SEX	4. GRADE	5. SD
FLORES Daniel		1935	M	GS-4	D
8. OFFICIAL POSITION TITLE File Clerk		7. OFFICIAL BR OF ASSIGNMENT OPER/RID/RE/TN		9. CURRENT STATION Hqtrs.	
9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT			
CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/>		INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/>			
XX CAREER-PROVISIONAL (See instructions - Section C)		XX ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/>			
SPECIAL (Specify):		SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P. 30 April 1963		12. REPORTING PERIOD (From - to) 13 December 1962 - 31 March 1963			
SECTION B		PERFORMANCE EVALUATION			
W - <u>Weak</u>		Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.			
A - <u>Adequate</u>		Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.			
P - <u>Proficient</u>		Performance is more than satisfactory. Desired results are being produced in a proficient manner.			
S - <u>Strong</u>		Performance is characterized by exceptional proficiency.			
O - <u>Outstanding</u>		Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.			
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Conducts name traces in the Main Index of the Records Integration Division.					RATING LETTER S
SPECIFIC DUTY NO. 2 Fulfills daily and weekly maintenance duties required of all name checkers; e.g., filing, auditing and refiling.					RATING LETTER P
SPECIFIC DUTY NO. 3					RATING LETTER
SPECIFIC DUTY NO. 4					RATING LETTER
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

APR 23 4 13 PM '63

During this reporting period, Mr. Flores continued to conduct himself in the exceptionally proficient manner which was noted in his previous Fitness Report. He is one of two name tracers who specialize in a particular area, a fact which tends to increase the difficulty as well as the responsibility of name tracing. In spite of this burden, Mr. Flores has consistently maintained an above average level of production and an exceptionally high quality in his finished products.

Mr. Flores is a conscientious and highly motivated employee who evidences a sound sense of responsibility. He has frequently voiced a desire to take advantage of any career opportunities the Agency may offer to him. He is currently enrolled as a full-time student at the American University.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

10 April 1963

SIGNATURE OF EMPLOYEE

[Signature]

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

10 months

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

10 April, 1963

OFFICIAL TITLE OF SUPERVISOR

Deputy Chief, RID/EL (H/S)

TYPED OR PRINTED NAME AND SIGNATURE

JAMES J. RALEY, Jr.

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

DATE

14 April 1963

OFFICIAL TITLE OF REVIEWING OFFICIAL

Chief, RID/Index

TYPED OR PRINTED NAME AND SIGNATURE

AUREY L. POSKY

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				036130			
SECTION A				GENERAL			
1. NAME (Last) (First) (Middle) FLORES, Daniel			2. DATE OF BIRTH 4 Aug 1935	3. SEX M	4. GRADE GS-4	5. SD D	
6. OFFICIAL POSITION TITLE File Clerk			7. OFF/DIV/BR OF ASSIGNMENT OPSER/RII/RR		8. CURRENT STATION Idgra.		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT				
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input checked="" type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) SPECIAL (Specify):			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE SPECIAL (Specify):				
11. DATE REPORT DUE IN O.P. 12 January 1963			12. REPORTING PERIOD (From - to) 12 March 1962 - 12 December 1962				
SECTION B				PERFORMANCE EVALUATION			
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).							
SPECIFIC DUTY NO. 1							RATING LETTER
Performs name traces of personal and impersonal subjects in the RI/Index.							S
SPECIFIC DUTY NO. 2							RATING LETTER
Fulfills daily and weekly requirements of maintenance duties; e.g., filing, purging, auditing, and screening of index cards.							P
SPECIFIC DUTY NO. 3							RATING LETTER
SPECIFIC DUTY NO. 4							RATING LETTER
SPECIFIC DUTY NO. 5							RATING LETTER
SPECIFIC DUTY NO. 6							RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION							RATING LETTER
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							P

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

From the outset Mr. Flores has shown many characteristics of an above-average employee. His initial training in the intricacies of his duty assignment was marked by a high degree of application, interest, and achievement. Since that time Mr. Flores has proven himself a conscientious and responsible employee, one whose work record is distinguished by a high calibre of quality and quantity.

Because of his fine record, Mr. Flores was chosen one of the three are specialists for this section. He specializes in the Spanish-Portuguese area and his work is characterized by exceptional proficiency.

At present Mr. Flores is registered at American University as a sophomore. Inasmuch as he has exhibited both potentiality and strong working habits, I recommend that Mr. Flores be given the Professional Battery Test at the earliest opportunity.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

3 January 1963

SIGNATURE OF EMPLOYEE

Manuel Flores

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

7 months

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

3 January 1963

OFFICIAL TITLE OF SUPERVISOR

Deputy Chief, RID/IN (R/S)

TYPED OR PRINTED NAME AND SIGNATURE

JAMES J. RALEY, Jr.

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I fully concur in the above evaluation.

DATE

3 January 1963

OFFICIAL TITLE OF REVIEWING OFFICIAL

Chief, RID/Index

TYPED OR PRINTED NAME AND SIGNATURE

AUREY L. JOEY

SECRET

SECRET
(When Filled In)

TRAINING EVALUATION--CLERICAL INDUCTION					
SECTION I IDENTIFYING INFORMATION					
NAME OF STUDENT FLORES, Daniel			SEX M	DATES OF ATTENDANCE 12-23 March 1962	
DATE OF BIRTH 4 August 1935		FOB DATE 12 March 1962		TITLE AND GRADE File Clerk GS-4	
SECTION II CHARACTERISTICS OF THE COURSE					
Each course subject is taught daily for a 3-day period. Students who do not meet Agency standards in shorthand and/or typewriting within this 3-day period receive further instruction in an attempt to meet the established qualifications. The second week of geography instruction is given to students who have not been assigned to their positions. It is possible that not all students will be assigned to every course subject.					
SECTION III OBJECTIVES					
To meet the typewriting criterion based on the scale on the reverse of this page. (For qualification, students must meet this requirement once.) To take dictation at 80 words a minute for 3 minutes and to transcribe with 5 or fewer errors in not more than 20 minutes. (For qualification, students must meet this requirement once.) To recognize errors in grammar and in punctuation and capitalization. To study the politics and the geography of countries of Europe and Asia. (These continents are covered in alternate weeks.) To receive instruction in typing of reproduction masters, making erasures, caring for the typewriter, and utilizing typing shortcuts. To become familiar with the system of filing as outlined in the Agency's "Handbook for Subject Filing."					
SECTION IV QUALIFICATION IN SKILLS					
COURSE PERFORMANCE				QUALIFICATION	
				QUALIFIED	
				NOT QUALIFIED	
				IN COURSE AT 100	
TYPEWRITING	WPM	ERRORS	RET		
	44	15	22		X
SHORTHAND	WPM	ERRORS	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>		
SECTION V RATINGS					
Agency samplings of students' ratings indicate the percentage distribution as noted below. This trainee's rating is marked by the asterisk.					
SUBJECT	POOR	FAIR	SATISFACTORY	EXCELLENT	
GRAMMAR	4%	16% *	51%	27%	
PUNCTUATION AND CAPITALIZATION	26% *	27%	41%	12%	
EXCELLENT - - - thorough knowledge of material presented and above-average performance in meeting course goals. SATISFACTORY - - average knowledge of material presented and adequate performance in meeting course goals. FAIR - - - - - borderline knowledge of material presented and limited performance in meeting course goals. POOR - - - - - inadequate knowledge of material presented and unsatisfactory performance in meeting course goals.					
SECTION VI FAMILIARIZATION LECTURES					
<input checked="" type="checkbox"/> GEOGRAPHY OF EUROPE		<input type="checkbox"/> GEOGRAPHY OF ASIA		<input checked="" type="checkbox"/> AGENCY FILING SYSTEM	
<input checked="" type="checkbox"/> OFFICE PRACTICE					
SECTION VII COMMENTS					
<p>This student was assigned to the class in typewriting at his own request. Because it is not necessary for an individual whose job title is File Clerk to meet Agency standards in typewriting, he was released from training when his final processing was completed.</p>					
CONTINUE COMMENTS ON REVERSE SIDE <input type="checkbox"/> OVER					
FOR THE DIRECTOR OF TRAINING:			SIGNATURE OF CHIEF, CLERICAL INDUCTION TRAINING		
			MARY J. KEEK 		

SECRET

(When Filled In)

<u>GROSS WORDS</u>	<u>ERRORS</u>	<u>NET WORDS</u>	<u>GROSS WORDS</u>	<u>ERRORS</u>	<u>NET WORDS</u>
45	5	40	63	14	49
46	6	40	64	14	50
47	6	41	65	15	50
48	7	41	66	15	51
49	7	42	67	16	51
50	7	43	68	16	52
51	8	43	69	16	53
52	9	43	70	16	54
53	9	44	71	17	54
54	9	45	72	18	54
55	10	45	73	18	55
56	10	46	74	19	55
57	10	47	75	19	56
58	10	48	76	20	56
59	11	48	77	20	57
60	12	48	78	20	58
61	12	49	79	21	58
62	13	49	80	21	59

This scale conforms to that used by the Civil Service Commission. The number of errors indicated after the gross is the maximum permissible for that specific number of gross words typed; i.e., an individual who types 60 words per minute would be allowed no more than 12 errors in a 10-minute typewriting test.

SECRET

SECRET
(When Filled In)

REPORT OF TEST RESULTS (CLERICAL SKILLS)

NAME FLORES, Daniel (NMI)	TITLE AND GRADE File Clerk GS-4	DATE OF BIRTH 4 August 1935
DATE 14 March 1962		PERSONNEL OFFICER - IAS

AGENCY STANDARDS

TYPEWRITING The typewriting criterion is based on the scale on the reverse of this page.

SHORTHAND Dictation at 80 words a minute for three minutes and the transcription of the dictated material with five or fewer errors in not more than twenty minutes.

EXAMINEE'S RATINGS

TYPEWRITING: WAM 43 Errors 14 Net 27 Qualified: Yes _____ No X

SHORTHAND: WAM _____ Errors _____ Qualified: Yes _____ No _____

REMARKS: Training in typewriting recommended if he so desires. It is not necessary for his job title.

MARY J. MEFE
CHIEF, CLERICAL INDUCTION TRAINING

SECRET

CONFIDENTIAL

(When Filled In)

THIS INFORMATION IS FOR AUTHORIZED PERSONS ONLY. TEST SCORES ARE NOT TO BE REVEALED TO EXAMINEE.

OFFICE OF TRAINING, ASSESSMENT AND EVALUATION STAFF
EVALUATION OF TEST RESULTS (CLERICAL)

DATE

15 March 1962

NAME

FLORES, Daniel (M1)

GRADE AND POSITION

GS-11 File Clerk

PERSONNEL OFFICER

TAS

TEST RESULTS ARE AN INTEGRAL PART OF THE FACT FINDING PHASE OF MOST PERSONNEL OPERATIONS. EVALUATION OF THESE MEASUREMENTS IN RELATION TO OTHER FACTUAL MATERIAL IN THE PERSONNEL RECORD PROVIDES ONE OF THE BASIS FOR THE SELECTION AND PLACEMENT OF APPLICANTS AND FOR COUNSELING WITH NEW EMPLOYEES. HOWEVER, THE DECISION AS TO WHETHER AN INDIVIDUAL CAN AND WILL PERFORM THE DUTIES OF A SPECIFIC JOB MUST REST ON THE JUDGMENT OF THE RECRUITER OR PLACEMENT OFFICER, WHO CONSIDERS ALL ASPECTS OF THE INDIVIDUAL'S ABILITY, BACKGROUND, AND PERSONALITY IN RELATION TO THE REQUIREMENTS OF THE AGENCY.

THIS REPORT EVALUATES THE SUBJECT'S PERFORMANCE BY COMPARING HIS SCORES WITH THOSE OF A NATIONWIDE GROUP OF TWELFTH GRADE STUDENTS OF THE SAME SEX. SPECIFIC ABILITIES ARE IDENTIFIED BY USING A VARIETY OF TESTS RANGING FROM WORK SAMPLES OF FILING AND CHECKING TO MEASURES OF REASONING ABILITY. IN EVALUATING THESE TEST SCORES FOUR GENERAL CONCEPTS SHOULD BE KEPT IN MIND: (1) TESTS ARE MORE EFFECTIVE IN SCREENING OUT POTENTIAL FAILURES THAN IN IDENTIFYING THOSE WHO WILL PERFORM SUCCESSFULLY. (2) PERSONS WHOSE SCORES ARE PREDOMINANTLY IN THE LOWEST 15% ORDINARILY ARE NOT SUITED FOR OFFICE WORK. (3) MOST JOBS DO NOT REQUIRE HIGH SCORES ON ALL TESTS, BUT HAVE A RANGE WITHIN WHICH PEOPLE CAN DO THE WORK EFFECTIVELY AND TEND TO REMAIN ON THE JOB. (4) EFFICIENCY IN PLACEMENT NECESSITATES MATCHING THE JOB AND THE INDIVIDUAL; BOTH THOSE WHO ARE OVERQUALIFIED AND THOSE WHO ARE UNDERQUALIFIED ARE LIKELY TO QUIT.

A DESCRIPTION OF THE SIX TESTS IN THE BATTERY IS GIVEN ON THE BACK OF THIS FORM. IN CASES WHERE THE PATTERN OF THE TEST SCORES APPEARS TO INDICATE APTITUDE IN PARTICULAR AREAS THIS WILL BE NOTED IN THE REMARKS SECTION. WHERE RESEARCH STUDIES HAVE BEEN CONDUCTED ON THE RELATIONSHIP OF THE TESTS TO JOB PERFORMANCE THESE COMMENTS WILL RELATE TO SPECIFIC JOBS. THIS SECTION MAY ALSO INCLUDE A BRIEF ANALYSIS OF THE INDIVIDUAL'S POTENTIAL IN RELATION TO HIS INTERESTS AND BACKGROUND.

CONSULTATION OR FURTHER INFORMATION REGARDING INTERPRETATION OF TEST SCORES IS AVAILABLE BY CALLING EXTENSION 8017.

NAME OF TEST	VERY LOW		LOW		AVERAGE		HIGH		VERY HIGH	
	25	50	75	100	125	150	175	200	225	250
CLERICAL SPEED AND ACCURACY							✓			
SPELLING							✓			
SENTENCES					✓					
NUMERICAL ABILITY						✓				
ABSTRACT REASONING						✓				
VERBAL REASONING					✓					

REMARKS:

Mr. Flores should be referred for P&TH, preferably while he is still in the IAS.

REPRODUCTION OF ABOVE PRINTS ARE GIVEN ON REVERSE SIDE OF THIS REPORT

CONFIDENTIAL (When Filled In)

CERTIFICATION OF LANGUAGE PROFICIENCY IN <u>Spanish A</u>										DATE PREPARED <u>4-1-80</u>	
SSN			NAME (Last-First-Middle)			DATE OF BIRTH			GRADE	DIVISION	
						YEAR	MONTH	DAY			
4610426230			Flores, Daniel			358			4	13 LA	
TYPE CHANGE			READING*			SPEAKING*			UNDERSTANDING*		
C R1.18			+			5			5		
DATE TESTED			TYPE TEST			80			2 20 N		
*SEE BACK FOR PROFICIENCY LEVEL DEFINITIONS											
REMARKS <u>Outside Test.</u>											
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> CERNUAL SYSTEM Updated APR 4 1980 By: <u>[Signature]</u> </div> <div style="border: 1px solid black; padding: 5px; display: inline-block; margin-left: 20px;"> CERTIFICATION OF PROFICIENCY <u>[Signature]</u> CHIEF OF TESTING/LS TEST NUMBER <u>42001</u> </div>											

FORM 1273 OBSOLETE PREVIOUS EDITIONS

CONFIDENTIAL

REV 40 YRS PR DATE PREPARED
JRY 4409.2 BY 011956

10-48

PART 1 - INFO SYS BR.

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE				
DO NOT COMPLETE FOR HEADQUARTERS USE ONLY				
NAME OF EMPLOYEE		DATE RECEIVED AT HEADQUARTERS		DATE RECEIVED BY CASUAL SERVICE
Daniel Flores		22 May 79		Lawrence Sternfield
DATE RECEIVED AT HEADQUARTERS		SPATIAL NUMBER		HOME BASE COMPONENT
5 June 1979		JMMAT-14447		LA
DATE OF BIRTH	SERVICE DESIGN	CURRENT POSITION AND GRADE	STATION OR BASE	
4 Aug 35	DQG	Ops Officer, GS-13	Mexico City	
TO BE COMPLETED BY EMPLOYEE				
1. DATE OF PLS ARRIVAL IN FIELD	10. REQUESTED DATE OF DEPARTURE	11. EXPECTED DATE OF FIRST CHECK-IN AT HQ	12. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE	
February 1978	Operations Officer GS-13	SEE 6A	SEE 6A	
3. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:				
Spouse - 43 Daughter - 5				
4. PERSONAL ESTABLISHMENT FACTORS THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:				
Child's schooling				
5. LIST YOUR MAJOR DUTIES DURING CURRENT ASSIGNMENT (See special note on transmittal form).				
Liaison Officer in charge of an 18-man unit.				
6. TRAINING DESIRED INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS				
Training in a third language. Additional management training offered either by the Agency or by a private institution. Consideration for an appointment to a War College.				

202

SECRET

02, MCDL CL BY 062212

S E C R E T

CA Continued. . .

amenable to an extension in Mexico City for a period of 12 to 16 months depending on the timing of the assignment. If I were to be assigned to a country where an additional language is needed, time for language training should be taken into consideration.

In the event that a position as Chief of Base does not become available within the next year or two, my second choice is to be considered for a War College either for calendar year 1980 or 1981. This would enable me to more fully participate in the Agency's rotational program and would provide me with a higher level of training needed for career mobility in the Agency.

My third choice is to be considered as a candidate for the agency's management program at one of the participating Universities in the United States with the intention of accepting a field assignment immediately after the termination of this training. I am prepared to make all the necessary arrangements toward this end (i.e., applying for admission, etc.) provided a list of Universities is furnished to me.

As noted above, I am willing to remain in Mexico City through the summer of 1981 if my first choice is approved. In the event that my first choice cannot be granted I would be available to return to the United States in the summer of 1980 to prepare for my second or third choice. Should my second or third choice not be granted, I would prefer to return to the United States for an assignment in Washington.

S E C R E T

ADMINISTRATIVE
Internal Use Only

C 10

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.

NAME

LAST

FIRST

MIDDLE

1-6

(Print)

7-24

036130

Flores

Daniel

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (OHP ONLY). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 59, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37 38 39		40-42
0	2	1	5	7	8		1	Mexico	4 5 0

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39		40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.

IN 0326885

DOCUMENT DATE PERIOD

2/15/78

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCO	DATE	SIGNATURE
C & L DIVISION, CTRD.	2/23/78	
C & P DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

FORM 1451a

ADMINISTRATIVE-Internal Use Only

(4-10)

CONFIDENTIAL
(When Filled In)

NOTE TO OUTGOING PCS TRAVELERS

Central Processing Branch has been charged with responsibility for ensuring that all employees processing PCS to the field have reviewed the field version of the Employee Conduct Handbook. You will not be checked out for your proposed travel until you sign the following statement and return it to CPB. Your Personnel Officer can provide you with a copy of the Handbook.

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Field Handbook 20-4, Employee Conduct, dated 9 July 1970.

DANIEL FLORES

NAME
(Please Print)

Daniel Flores

SIGNATURE

Jun 30, 1978

DATE

FORM 3661
5-74

CONFIDENTIAL

E2, IMPDET CL. BY: 007622 (4)

CONFIDENTIAL
(When Filled In)

NOTE TO OUTGOING PCS TRAVELERS

Central Processing Branch has been charged with responsibility for ensuring that all employees processing PCS to the field have reviewed the field version of the Employee Conduct Handbook. You will not be checked out for your proposed travel until you sign the following statement and return it to CPB. Your Personnel Officer can provide you with a copy of the Handbook.

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Field Handbook 20-4, Employee Conduct, dated 9 July 1970.

Daniel Flores

NAME
(Please Print)

Daniel Flores

SIGNATURE

14 Nov. 1977

FORM 3661
5-74

CONFIDENTIAL

E2, IMPDET CL. BY: 007622 (4)

SECRET
(When Filled In)

SERVICE ABROAD AGREEMENT

I. GENERAL

IT IS UNDERSTOOD THAT YOU AGREE TO SERVE THE PERIOD OF SERVICE ABROAD PRESCRIBED IN SECTION II BELOW AND THAT THE GOVERNMENT IS OBLIGATED TO RETURN YOU, YOUR DEPENDENTS AND YOUR HOUSEHOLD AND PERSONAL EFFECTS UPON THE SATISFACTORY COMPLETION OF THIS PERIOD. YOUR ALLOWABLE EXPENSES WILL BE DETERMINED IN ACCORDANCE WITH AGENCY REGULATIONS.

IF YOU TERMINATE YOUR PERMANENT ASSIGNMENT OUTSIDE THE CONTINENTAL UNITED STATES BEFORE YOU COMPLETE 12 MONTHS OF CREDITABLE SERVICE FOLLOWING THE DATE OF YOUR ARRIVAL ABROAD, YOU WILL BE REQUIRED TO REIMBURSE THE GOVERNMENT FOR ALL EXPENSES IT INCURS IN THE TRAVEL AND TRANSPORTATION OF YOU, YOUR DEPENDENTS, YOUR HOUSEHOLD AND PERSONAL EFFECTS TO YOUR POST. IF YOU FAIL TO COMPLETE YOUR PRESCRIBED TOUR OF DUTY ABROAD YOU WILL NOT BE ENTITLED TO THE RETURN TRAVEL AND TRANSPORTATION OF YOURSELF, YOUR DEPENDENTS AND YOUR HOUSEHOLD AND PERSONAL EFFECTS TO THE UNITED STATES. IF, HOWEVER, AGENCY OFFICIALS DETERMINE THAT YOUR EARLY DEPARTURE IS NECESSARY FOR OFFICIAL REASONS, OR FOR PERSONAL REASONS OF SIGNIFICANT INTEREST TO THE GOVERNMENT, THEY MAY WAIVE THE REIMBURSEMENT OF EXPENSES ALREADY INCURRED, OR AUTHORIZE YOUR RETURN TRAVEL AND TRANSPORTATION, WHICHEVER IS APPLICABLE.

IF ELIGIBLE UNDER THE TERMS OF HR 20-30, YOU WILL BE GRANTED HOME LEAVE AS SOON AS IT CAN BE ARRANGED AT GOVERNMENT CONVENIENCE AFTER COMPLETION OF YOUR PRESCRIBED TOUR OF DUTY, PROVIDED YOU HAVE SERVED AT LEAST 18 MONTHS OF CONTINUOUS CREDITABLE SERVICE OUTSIDE THE UNITED STATES. HOME LEAVE AND HOME LEAVE TRAVEL ARE CONTINGENT UPON YOUR WILLINGNESS TO RETURN, AND CONTEMPLATION BY AGENCY OFFICIALS THAT YOU WILL RETURN TO SERVICE OUTSIDE THE UNITED STATES IMMEDIATELY AFTER HOME LEAVE OR UPON COMPLETION OF AN ASSIGNMENT IN THE UNITED STATES.

YOU ARE ADVISED THAT ANY MONIES DUE YOU FROM THE GOVERNMENT MAY BE APPLIED IN LIQUIDATION OF ANY INDEBTEDNESS ARISING FROM VIOLATION OF THIS AGREEMENT. YOU WILL BE AFFORDED ALL NORMAL RECOURSE IN APPEALING DECISIONS MADE PURSUANT TO THIS AGREEMENT.

NAME OF EMPLOYEE	DATE	TIME	LOCATION	REMARKS
...

Daniel Flores

10

1

II. TOUR OF DUTY ABROAD

1. NAME OF POST OF ASSIGNMENT

Mexico City

2. PERIOD OF SERVICE ABROAD AS PRESCRIBED IN A, B, OR C BELOW

A. STANDARD TOUR OF DUTY OF 24 MONTHS

XX

C. NONSTANDARD VOL. OF DUTY IS _____ MONTHS FOR THIS TOUR ONLY FOR THE EMPLOYEE SIGNING THIS AGREEMENT. (SEE HR 10-18)

REQUESTED (Name of party)

OFFICIAL OFFICIAL

8. NONSTANDARD TOUR OF DUTY OF _____ MONTHS
PREVIOUSLY APPROVED PER HR 20-10.

OPERATING EXPENSES

J. Paul P. CIA/PERS

CONCLUSIONS

CARLOS J. GARCIA

210490 0308:1960

préface

01000000 00 01010000

III. PERMANENT PLACE OF RESIDENCE

3. YOUR "PERMANENT PLACE OF RESIDENCE" IS A PLACE TO WHICH ALL YOURS, YOURS OR YOURS' RESIDENCE IS OR AUTHORIZED TO CERTAIN SIGNIFICANT PERSONS TO GO TO, FOR SIGNIFICANT OR TO GO TO OR TO GO TO.

[illegible]

SECRET
(when filled in)

5. PHYSICAL DWELLING PLACE (Permanent Place of Residence unless address in item 6 is approved in lieu thereof) FULL ADDRESS <div style="font-size: 1.2em; font-family: cursive;">8151 LARKIN LANE VIENNA, VIRGINIA 22180</div>		6. OTHER PLACE REQUESTED (Requested Permanent Place of Residence if different from item 5) FULL ADDRESS 	
<div style="text-align: center;">APPROVED</div> DEPUTY DIRECTOR DATE <div style="font-size: 1.2em; font-family: cursive;">Ray L. Helmerich</div> <div style="font-size: 1.2em; font-family: cursive;">11/9/78</div>		<div style="text-align: center;">CONCUR</div> DEPUTY DIRECTOR DATE 	
<div style="text-align: center;">APPROVED</div> DEPUTY DIRECTOR DATE <div style="font-size: 1.2em; font-family: cursive;">Ray L. Helmerich</div> <div style="font-size: 1.2em; font-family: cursive;">11/9/78</div>		<div style="text-align: center;">APPROVED</div> DIRECTOR OF PERSONNEL DATE 	
IV. HOME LEAVE POINT			
7. AMONG THE PLACES YOU MAY REQUEST AS A HOME LEAVE POINT ARE: YOUR PERMANENT PLACE OF RESIDENCE SHOWN ABOVE, HEADQUARTERS AREA, AND WHERE YOUR CHILDREN, PARENTS, PARENTS-IN-LAW, BROTHERS, SISTERS, BROTHERS-IN-LAW, OR SISTERS-IN-LAW RESIDE.			
8. YOU MAY REQUEST FOR APPROVAL SOME OTHER POINT SUBJECT TO THE PROVISIONS OF HR 20-308(3)(C). THE REQUEST MUST BE ACCOMPANIED BY A MEMORANDUM EXPLAINING THE CIRCUMSTANCES.			
9. DESIGNATION PER ITEM 7 ABOVE FULL ADDRESS <div style="font-size: 1.2em; font-family: cursive;">PORTLAND, OREGON</div>		10. DESIGNATION PER ITEM 8 ABOVE FULL ADDRESS 	
RELATIONSHIP OF RELATIVE AT HOME LEAVE POINT <div style="font-size: 1.2em; font-family: cursive;">IN-LAWS</div>		<div style="text-align: center;">CONCUR</div> DEPUTY DIRECTOR DATE 	
<div style="text-align: center;">APPROVED</div> DEPUTY DIRECTOR DATE <div style="font-size: 1.2em; font-family: cursive;">Ray L. Helmerich</div> <div style="font-size: 1.2em; font-family: cursive;">11/9/78</div>		<div style="text-align: center;">APPROVED</div> DIRECTOR OF PERSONNEL DATE 	
EMPLOYEE CERTIFICATION			
I have read and understand my service obligations and travel entitlements as described in this agreement. <div style="font-size: 1.5em; font-family: cursive; display: flex; justify-content: space-between;"> [Signature] 11/9/78 </div>			

SECRET

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
1-8	(Print)	7-28	
036130	FLORES	DANIEL	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. '88, REVISED.

PCS DATES OF SERVICE											
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic)	CODE	30	30		CODE
28-28	27-28	26-30	31-31	30-30	29-30	2 - CORRECTION	37	38	39		40-42
						3 - CANCELLATION					

TDY DATES OF SERVICE											
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TDY (Basic)	CODE	30	30		CODE
28-28	27-28	26-30	31-31	30-30	29-30	3 - CORRECTION	37	38	39		40-42
						4 - CANCELLATION <td></td> <td></td> <td></td> <td></td> <td></td>					

03 08 77 03 11 77 2 CANADA 120

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION	
<input checked="" type="checkbox"/> TRAVEL VOUCHER <input type="checkbox"/> CABLE <input type="checkbox"/> OTHER (Specify)	<input type="checkbox"/> DISPATCH <input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT

DOCUMENT IDENTIFICATION NO. 6A10-77 DOCUMENT DATE/PERIOD 3/8-3/11/77

REMARKS

PREPARED BY DATE <u>7/1/77</u>	REPORT SUBMITTED ON DATE <u>7/1/77</u>	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT ENTERED SIGNATURE <u>[Signature]</u>
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THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.

NAME

LAST

FIRST

MIDDLE

(Print)

(Print)

036130

FLORES

DANIEL

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 96, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37	38	39
									40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1 - TDY (Basic) 2 - CORRECTION 3 - CANCELLATION	37	38	39
02	04	77	02	06	77	2		WESTERN HEMISPHERE	40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. LA 10-77 DOCUMENT DATE/PERIOD 2/3-2/6/77

REMARKS

PREPARED BY	REPORT SUBMITTED BY	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DATE	DATE	SIGNATURE
10-0-0 DIVISION, 4700	4/10/77	Wm. E. Mangan

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

10-1051a

ADMINISTRATIVE-Internal Use Only

10-1051

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO. 1-8	NAME		
	LAST (Print)	FIRST 7-18	MIDDLE
036130	FLORES	DANIEL	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 98, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39		40-42
04	12	77	04	15	77		2		CANADA	120

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS, OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. LA 10-77	DOCUMENT DATE/PERIOD 4/12 - 4/15/77
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REMARKS

PREPARED BY OFF 1. DIVISION, CTRD. 2. DIVISION	<input checked="" type="checkbox"/> REPORT SUBMITTED ON CONTROL DOCUMENT DATE 7/14/77	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED SIGNATURE Mike Mawang
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THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

14510

ADMINISTRATIVE-Internal Use Only

(4-10)

CONFIDENTIAL
(When Filled In)

RESIDENCE AND DEPENDENCY REPORT

AN ORIGINAL OF THIS FORM WILL BE EXECUTED BY EACH EMPLOYEE AT THE TIME OF HIS APPOINTMENT AND WHEN A CHANGE OCCURS IN THE INFORMATION GIVEN BELOW. ITEMS OF CHANGE MAY BE REPORTED IN THE APPROPRIATE BLANKS WITHOUT COMPLETING THE REMAINDER OF THE FORM EXCEPT THE EMPLOYEE'S SIGNATURE AND DATE. WHEN EXECUTING ITEM 4 ALSO COMPLY WITH HRD 20-7 PERSONNEL EMPLOYMENT AND LOCATOR RECORDS. THIS FORM WILL BE COMPLETED ONLY BY HEADQUARTERS PERSONNEL AND NOT SENT TO THE FIELD. FORM WILL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.

GENERAL

NAME OF EMPLOYEE (Last) (First) (Middle)
Flores Daniel

1. MARITAL STATUS (Check one)

<input type="checkbox"/> SINGLE	<input checked="" type="checkbox"/> MARRIED	<input type="checkbox"/> SEPARATED	<input type="checkbox"/> DIVORCED	<input type="checkbox"/> WIDOWED	<input type="checkbox"/> ANNULLED
---------------------------------	---	------------------------------------	-----------------------------------	----------------------------------	-----------------------------------

IF MARRIED, PLACE OF MARRIAGE: **Lima, Peru** DATE OF MARRIAGE: **18 Nov 1960**

IF DIVORCED, PLACE OF DIVORCE DECREE: **N/A** DATE OF DECREE:

2. MEMBERS OF FAMILY

NAME OF SPOUSE	ADDRESS (No., Street, City, State, Zip Code)	TELEPHONE NO.
Dorothy A. Flores	8151 Larkin La. Vienna, Va. 22180	573-0797
NAME OF CHILDREN	ADDRESS	SEX DATE OF BIRTH
Zola Marie Flores	8151 Larkin La. Vienna, Va. 22180	F 15 Mar 74

NAME OF FATHER (or male guardian)	ADDRESS	TELEPHONE NO.
Jose S. Flores	Box 39 Gonzales, Texas 78629	512-672-6061

NAME OF MOTHER, INCLUDING MAIDEN NAME (or female guardian)	ADDRESS	TELEPHONE NO.
N/A		

WHAT MEMBERS OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY.
None

3. OTHER RELATIVES WHO ARE DEPENDENT UPON ME FOR AT LEAST 51% OF THEIR SUPPORT AND MEET OTHER REQUIREMENTS IN TRAVEL REGULATIONS (HR 27-15). SPECIFY NAMES AND RELATIONSHIPS.

NAME	DATE OF BIRTH	RELATIONSHIP
N/A		

4. PERSON RESIDING IN U.S. TO BE NOTIFIED IN CASE OF EMERGENCY

NAME (Last, First, Middle) (Last-First-Middle)	RELATIONSHIP
Mr. Vicente Patlan	Brother-in-law
HOME ADDRESS (No., Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE 627 S. River St., Seguin, Texas 78155	HOME TELEPHONE NUMBER 512-379-1087
BUSINESS ADDRESS (No., Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE Seguin School District	BUSINESS TELEPHONE & EXTENSION

IS THE INDIVIDUAL NAMED ABOVE SITTING OF YOUR AGENCY AFFILIATION? (If "No" give name and address of organization he believes you work for.)	YES	NO
Department of State		<input checked="" type="checkbox"/>

IS THE INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF IN THE EVENT YOU ARE INCAPABLE? (If "No" give name and address of person, if any, who can make such decisions in case of emergency.)	YES	NO
Dorothy A. Flores - 8151 Larkin Lane, Vienna, Va. 22180	<input checked="" type="checkbox"/>	

DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer is "No" explain on reverse side.)	YES	NO
	<input checked="" type="checkbox"/>	

The persons named in item 2 or 3 above may also be notified in case of emergency. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 6 ON THE REVERSE SIDE OF THIS FORM.

CONFIDENTIAL

(When filled in)

5. VOLUNTARY ENTRIES			
<p>Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.</p> <p>INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.</p> <p align="center" style="margin-top: 10px;">Riggs National Bank Joint account: Daniel and/or Dorothy a Flores</p>			
ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION?		<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
IF YES, DO YOU HAVE A JOINT ACCOUNT?		<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
HAVE YOU COMPLETED A LAST WILL AND TESTAMENT?		<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO. (If "Yes" where is document located?)
<p align="center">At home. New is being prepared.</p>			
HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS?			
<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO. (If "Yes" give name(s) and address)	
<p align="center">Mr. and Mrs. Raymond Arnett</p>			
HAVE YOU EXECUTED A POWER OF ATTORNEY?		<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO. (If "Yes", who possesses the power of attorney?)
6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS			
7. RESIDENCE DATA - TO BE COMPLETED ONLY BY EMPLOYEES ENTERING ON DUTY <i>(No Approval Required)</i>			
RESIDENCE WHEN EMPLOYED (Full Address)		PERMANENT PLACE OF RESIDENCE AS DEFINED IN HR 22-3 (Full Address)	
8. CHANGE IN PERMANENT PLACE OF RESIDENCE (See HR 22-3) <i>(To Be Completed by Employee Desiring Such Change While Assigned to Headquarters)</i>			
FULL ADDRESS		DEPUTY DIRECTOR OR DESIGNATE	DATE
		DIRECTOR OF PERSONNEL (when applicable per HR 22-3)	DATE
SIGNED AT:		DATE:	
		Dec 30 1977	
SIGNATURE		DATE	

CONFIDENTIAL

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
1-6 026130	(Print) FICKLE	7-24 DONIC	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58 REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
29-29	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39		40-42
12	14	77	12	15	77		2		CANADA	120

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.

DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
<input checked="" type="checkbox"/> HFB	DATE 2/1/78	SIGNATURE <i>Robert D. Jone</i>
<input checked="" type="checkbox"/> C & L DIVISION, CTSD.		
<input type="checkbox"/> C & T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE

1-6 026130	7-16 (Print) FLORES	7-16 DANIEL
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INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 99, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY	COUNTRY		CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic)	CODE				
25-26	27-28	29-30	31-32	33-34	35-36	2 - CORRECTION	37	38	39		40-42
						3 - CANCELLATION					

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY	AREA(S)		CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TDY (Basic)	CODE				
25-26	27-28	29-30	31-32	33-34	35-36	4 - CORRECTION	37	38	39		40-42
						5 - CANCELLATION					

011678	011978	2	WESTERN H.	811
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OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
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REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
WCO C & L DIVISION, CTBB. C & T DIVISION	DATE 2/6/78	SIGNATURE Daniel J. Farn

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ASSAID

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.

NAME

LAST

FIRST

MIDDLE

1-6

(Print)

7-28

026130

FLORES

DANIEL

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR						
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic)	CODE	37	38	39	CODE
						2 - CORRECTION					40-42
						3 - CANCELLATION					

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		AREAS	
MONTH	DAY	YEAR	MONTH	DAY	YEAR						
25-26	27-28	29-30	31-32	33-34	35-36	1 - TDY (Basic)	CODE	37	38	39	CODE
10	28	77	11	03	77	2 - CORRECTION					40-42
						3 - CANCELLATION					

WESTERN
HEMISPHERE 811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input checked="" type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.

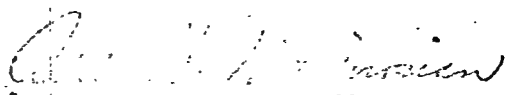
DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY	REPORT ANNOTATED TO CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCO	DATE	SIGNATURE
<input checked="" type="checkbox"/> C & L DIVISION CYBB	1/23/78	Danit L. Jan
<input type="checkbox"/> C & T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

CONFIDENTIAL

SE TRAINING REPORT		SOVIET/EAST EUROPEAN OPERATIONS COURSE	
STUDENT Flores, Daniel		YEAR OF BIRTH 1935	GRADE GS-12
ECO DATE March 1962	OFFICE LA	SERVICE DESIGNATION D	COURSE DATES 7 - 15 November 1977
<p align="center">COURSE OBJECTIVES</p> <p>To orient the student on the special nature of the Directorate of Operation's Soviet/East European target and to examine the application of clandestine methods for collecting information on assessing and preparing recruitment operations against Soviet/East European personalities.</p>			
<p align="center">ACHIEVEMENT RECORD</p> <p>This is a certificate of attendance. No evaluation is made of individual performance in the course.</p>			
<p align="right">  SE Training Officer </p>			

FORM 3687 OBSOLETE PREVIOUS EDITIONS

CONFIDENTIAL

E-2. IMPDET CL. BY. 059524 (04-45)

CONFIDENTIAL

OFFICE OF TECHNICAL SERVICES

BEHAVIORAL ACTIVITIES BRANCH

HUMAN ELEMENTS IN OPERATIONAL TARGETING

1. This certifies that Daniel Flores - LA has completed five days of training in the course, Human Elements in Operational Targeting.

2. Primary goals of the course are to familiarize Agency case officers with applied psychology techniques as they relate to operational data collection, evaluation and application in the assessment and manipulation of target personalities.

3. This is a certificate of attendance only. Student achievement was not evaluated.


OTS/Training Branch

E2 IMPDET CL BY 019432

CONFIDENTIAL

S-E-C-R-E-T

TRAINING REPORT/CERTIFICATION OF HANDGUN QUALIFICATION

TITLE: Countering Terrorist Tactics Course No. 16-77 DATES: 19-23 September 1977

STUDENT: FLAHERTY, Daniel OFFICE: IA SD: D

PURPOSE AND SCOPE OF COURSE:

(S) This course stressed countermeasures to thwart terrorist acts against U.S. personnel abroad. Coverage includes a discussion of the modus operandi of terrorist groups, recognition and familiarity with explosive devices employed, basic skills training in the use of hand weapons and Mace-type chemical devices, discussion and demonstration of residential security measures, and specialized driving techniques designed to counter vehicular kidnapping attempts.

PERFORMANCE RECORD:

(U/ALUO) This is to certify that the student has satisfactorily completed the prescribed course of instruction.

HANDGUN QUALIFICATION:

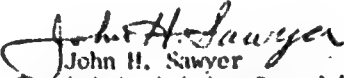
(C) Student completed 24 hours of instruction on handguns at the Special Training Center on 23 September 1977; subsequently fired the Handgun Qualification test achieving a score of:

Revolver (Cal. - .38)	<u>289</u>
Automatic (Cal. - 9mm)	<u>255</u>

out of a possible 300.

(U/ALUO) The student demonstrated satisfactory application of safety procedures; mechanical aptitude; marksmanship techniques; and maintenance during range firing/classroom sessions; and is qualified to use the handguns (or similar guns) listed above.

FOR THE DIRECTOR OF TRAINING:


John H. Sawyer
Chief, Special Activities Branch/OTD
Special Training Center

9/26/77
Date

S-E-C-R-E-T

E2 IMPDET
CL by 056382

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
1-5	(Print)	7-28	
2-36-134	14000 Daniel		

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE "USE NUMBER" IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATED BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 56, REVISED

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-29	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-29	29-30	31-32	33-34	35-36	1 - TDY (Basic) 2 - CORRECTION 3 - CANCELLATION	37	38 39		40-42
2	0	16	1	2	08	2	2		Canada	120

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
<input type="checkbox"/> CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. 616 14-1-77	DOCUMENT DATE/PERIOD 1. 2. 26 25-30 Sept 77
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REMARKS

PREPARED BY DFO	REPORT SUBMITTED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DATE 10/6/77	SIGNATURE <i>[Signature]</i>	

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.

NAME

LAST

FIRST

MIDDLE

1-6

(Print)

7-28

056150

Flannery

Donald

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (*One only*). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 98, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37	38	39

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	ARTICLE	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38	39
2	1	77	0	1	77		2		

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.

41-10-77

DOCUMENT DATE/PERIOD

1 Dec 76 to 30 Sept 77

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
SEA	DATE	SIGNATURE
C & L DIVISION, CYRO.	21.2.77	
C & L DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD												
TO: Office of Personnel, Control Division, Statistical Reporting Branch												
SERIAL NO. 1-0 036130		NAME										
		LAST (Print) FLORES			FIRST 7-26 DANIEL				MIDDLE			
INSTRUCTIONS												
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.												
PCS DATES OF SERVICE												
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION			CODE	CODE 40-42		
25-26	27-28	29-30	31-32	33-34	35-36				37			38
TDY DATES OF SERVICE												
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION			CODE	CODE 40-42		
25-26	27-28	29-30	31-32	33-34	35-36				37			38
02	09	77	02	18	77				2	CANADA 120		
OFFICE OF PERSONNEL USE ONLY - PUNCH AREA												
<i>per. Jague 5467</i>												
SOURCE DOCUMENT AND CERTIFICATION												
<input checked="" type="checkbox"/> TRAVEL VOUCHER <input type="checkbox"/> CABLE <input type="checkbox"/> OTHER (Specify)						DISPATCH DUTY STATUS OR TIME AND ATTENDANCE REPORT						
DOCUMENT IDENTIFICATION NO. LA 10-77						DOCUMENT DATE/PERIOD 2/9 - 2/18/77						
REMARKS												
PREPARED BY				REPORT ANNOTATED ON CONTROL DOCUMENT				ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED				
<input checked="" type="checkbox"/> C & L DIVISION, CTRD. <input checked="" type="checkbox"/> C & T DIVISION				DATE 3/25/77				SIGNATURE <i>Mike Mawanga</i>				
THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER												

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
1-6 036130	(Print) FLORES	2-28 DANIEL	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39		40-42
02	22	77	02	25	77		2		CANADA	120

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. LA 10-77 DOCUMENT DATE/PERIOD 2/22-2/25/77

REMARKS

PREPARED BY	REPORT SUBMITTED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCO	DATE 3/25/77	SIGNATURE Mike Mawung
C & L DIVISION, CYDR		
C & T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
036130	ELCRES	DANIEL	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (Only only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37	38-39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 3 - CORRECTION 4 - CANCELLATION	37	38-39		40-42
03	03	77	03	05	77		2		WESTERN HEMISPHERE	811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. LA 10-77	DOCUMENT DATE PERIOD 3/3-3/5/77
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REMARKS

PREPARED BY [Signature]	REPORT SUBMITTED TO CONTROL DOCUMENTS	ADDITIONAL DATA CERTIFIED CORRECT BY [Signature]
DATE 3/25/77	[Signature]	

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

14510

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CONFIDENTIAL
(When Filled In)

RESIDENCE AND DEPENDENCY REPORT

AN ORIGINAL OF THIS FORM WILL BE EXECUTED BY EACH EMPLOYEE AT THE TIME OF HIS APPOINTMENT AND WHEN A CHANGE OCCURS IN THE INFORMATION SHOWN BELOW. ITEMS OF CHANGE MAY BE REPORTED IN THE APPROPRIATE BLOCKS WITHOUT COMPLETING THE REMAINDER OF THE FORM EXCEPT THE EMPLOYEE'S SIGNATURE AND DATE. WHEN EXECUTING ITEM 4 ALSO COMPLY WITH HDB 20-7, PERSONNEL EMERGENCY AND LOCATOR RECORDS. THIS FORM WILL BE COMPLETED ONLY BY HEADQUARTERS PERSONNEL AND NOT SENT TO THE FIELD. FORM WILL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.

GENERAL

NAME OF EMPLOYEE (Last) **Flores** (First) **Daniel** (Middle)

1. MARITAL STATUS (Check one)

☐ SINGLE ☒ MARRIED ☐ SEPARATED ☐ DIVORCED ☐ WIDOWED ☐ ANNULLED

IF MARRIED, PLACE OF MARRIAGE

Lima, Peru

DATE OF MARRIAGE

18 Nov 1960

IF DIVORCED, PLACE OF DIVORCE DECREE

DATE OF DECREE

2. MEMBERS OF FAMILY

NAME OF SPOUSE

Dorothy A. Flores

ADDRESS (No. Street, City, State, Zip Code)

8151 Larkin Lane, Vienna, Va.

TELEPHONE NO.

573-0797

NAMES OF CHILDREN

Zola Marie Flores

ADDRESS

(Same as above)

22180

SEX

F

DATE OF BIRTH

15 Mar 74

NAME OF FATHER (or male guardian)

ADDRESS

TELEPHONE NO.

NAME OF MOTHER, INCLUDING MOTHER NAME (or female guardian)

ADDRESS

TELEPHONE NO.

WHAT MEMBERS OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY.

Mr. Lonnie Bruce - Brother-in-law

3. OTHER RELATIVES WHO ARE DEPENDENT UPON ME FOR AT LEAST 51% OF THEIR SUPPORT AND MEET OTHER REQUIREMENTS IN TRAVEL REGULATIONS (HDB 22-15). SPECIFY NAMES AND RELATIONSHIPS.

NAME

DATE OF BIRTH

RELATIONSHIP

4. PERSON RESIDING IN U.S. TO BE NOTIFIED IN CASE OF EMERGENCY

NAME (Mr, Mrs, Miss)

Mr. Vincente Paltan

RELATIONSHIP

Brother-in-law

HOME ADDRESS (No. Street, City, State, Zip Code) and HOME TELEPHONE NUMBER

627 South River St., Seguin, Tex. 78155

512-379-1087

BUSINESS ADDRESS (No. Street, City, State, Zip Code) and HOME TELEPHONE NUMBER

Seguin School District System

IF THE ABOVE LIST NAME ABOUT DISTANCE TO YOUR HOME OR OFFICE, LIST THAT HOME AND ADDRESS OF ORGANIZATION OR AGENCY TO BE NOTIFIED IN CASE OF EMERGENCY

Department of State

IF THE ABOVE LIST NAME ABOUT DISTANCE TO YOUR HOME OR OFFICE, LIST THAT HOME AND ADDRESS OF ORGANIZATION OR AGENCY TO BE NOTIFIED IN CASE OF EMERGENCY

Dorothy A. Flores - Spouse

IF THE ABOVE LIST NAME ABOUT DISTANCE TO YOUR HOME OR OFFICE, LIST THAT HOME AND ADDRESS OF ORGANIZATION OR AGENCY TO BE NOTIFIED IN CASE OF EMERGENCY

THE PERSONS NAMED IN THIS FORM SHOULD BE TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY. PLEASE ADVISE THE PERSONS NAMED IN THIS FORM

CONFIDENTIAL

CONFIDENTIAL

(When Filled In)

5. VOLUNTARY ENTRIES	
Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.	
INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.	
ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION? <input type="checkbox"/> YES <input type="checkbox"/> NO	
IF YES, DO YOU HAVE A JOINT ACCOUNT? <input type="checkbox"/> YES <input type="checkbox"/> NO	
HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO. (If "Yes" where is document located?)	
HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS? <input type="checkbox"/> YES <input type="checkbox"/> NO. (If "Yes" give name(s) and address)	
HAVE YOU EXECUTED A POWER OF ATTORNEY? <input type="checkbox"/> YES <input type="checkbox"/> NO. (If "Yes", who possesses the power of attorney?)	
6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS	
7. RESIDENCE DATA - TO BE COMPLETED ONLY BY EMPLOYEES ENTERING ON DUTY (No Approval Required)	
RESIDENCE WHEN EMPLOYED (Full Address)	PERMANENT PLACE OF RESIDENCE AS DEFINED IN NR 22-2 (Full Address)
8. CHANGE IN PERMANENT PLACE OF RESIDENCE (See NR 22-2) (To Be Completed by Employee Desiring Such Change While Assigned to Headquarters)	
FULL ADDRESS	DEPUTY DIRECTOR OR DESIGNEE
	DATE
	CLASSIFICATION OF PERSONNEL (When Applicable) (Refer to NR 22-2)
SIGNED BY	DATE
<i>H. J.</i>	<i>1/51</i>

CONFIDENTIAL

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD																				
TO: Office of Personnel, Control Division, Statistical Reporting Branch										<div style="border: 1px solid black; padding: 5px; display: inline-block;"> FILE PURCHASED BY 4 </div>										
SERIAL NO.		NAME																		
		LAST		FIRST				MIDDLE												
036130		FLORES		DANIEL																
INSTRUCTIONS																				
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO DPM NO. 98, REVISED.																				
PCS DATES OF SERVICE																				
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			D/P USE ONLY		COUNTRY									
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION			27 28 29		CODE 40-42									
25-26	27-28	29-30	31-32	33-34	35-36															
TDY DATES OF SERVICE																				
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			D/P USE ONLY		AREA(S)									
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - TDY (Basic) 2 - CORRECTION 3 - CANCELLATION			27 28 29		CODE 40-42									
25-26	27-28	29-30	31-32	33-34	35-36															
04	26	76	05	08	76	2					WESTERN Hem 861									
OFFICE OF PERSONNEL USE ONLY - PUNCH AREA																				
SOURCE DOCUMENT AND CERTIFICATION																				
TRAVEL VOUCHER						DISPATCH														
CABLE						DUTY STATUS OR TIME AND ATTENDANCE REPORT														
OTHER (Specify)																				
DOCUMENT IDENTIFICATION NO.						DOCUMENT DATE PERIOD														
870-7-76						April 26 - May 9 76														
REMARKS																				
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>PREPARED BY</td> <td>REPORT SUBMITTED ON</td> <td>ADJUDICATED DATA CERTIFIED CORRECT BASED UPON SOURCE DOCUMENT FILED</td> </tr> <tr> <td>DATE</td> <td>DATE</td> <td>SIGNATURE</td> </tr> <tr> <td>6-8-76</td> <td></td> <td></td> </tr> </table>												PREPARED BY	REPORT SUBMITTED ON	ADJUDICATED DATA CERTIFIED CORRECT BASED UPON SOURCE DOCUMENT FILED	DATE	DATE	SIGNATURE	6-8-76		
PREPARED BY	REPORT SUBMITTED ON	ADJUDICATED DATA CERTIFIED CORRECT BASED UPON SOURCE DOCUMENT FILED																		
DATE	DATE	SIGNATURE																		
6-8-76																				
THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER																				

FORM 1451a (REVISED 1-64)

SECRET

(10-101)

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Internal Use Only

REPORT OF SERVICE ABROAD												FILE PUNCHED BY 170	
TO: Office of Personnel, Control Division, Statistical Reporting Branch													
SERIAL NO			LAST		FIRST		MIDDLE		NAME				
1-4			(Print)		1-10								
036130			FLORES		DANIEL								
INSTRUCTIONS													
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 88, REVISED.													
PCS DATES OF SERVICE													
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		COUNTRY		
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic)	2 - CORRECTION	3 - CANCELLATION	1967	1968	1969	CODE	
28-28	27-28	29-30	31-32	33-34	35-36				37	38	39	40-42	
TDY DATES OF SERVICE													
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		AREA(S)		
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - TDY (Basic)	2 - CORRECTION	3 - CANCELLATION	1967	1968	1969	CODE	
28-28	27-28	29-30	31-32	33-34	35-36				37	38	39	40-42	
06	15	76	06	20	76				2			WESTERN HEMISPHERE 811	
OFFICE OF PERSONNEL USE ONLY - PUNCH AREA													
SOURCE DOCUMENT AND CERTIFICATION													
<div style="border: 1px solid black; padding: 2px;"> <input checked="" type="checkbox"/> TRAVEL VOUCHER </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> CABLE </div> <div style="border: 1px solid black; padding: 2px;"> OTHER (Specify) </div>						DISPATCH							
						DUTY STATUS OR TIME AND ATTENDANCE REPORT							
DOCUMENT IDENTIFICATION NO.						DOCUMENT DATE/PERIOD							
LA 07-76						6-14-76							
REMARKS													
PREPARED BY						REPORT APPROVED BY				ABOVE DATA CERTIFIED CORRECT BASED UPON SOURCE DOCUMENT CITED			
DATE						DATE				SIGNATURE			
9-20-76										C. Wohlfert			
THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER													

C-O-N-F-I-D-E-N-T-I-A-L

TRAINING REPORT

Instructor Training Workshop

Student: Flores, Daniel Office: OTR
Year of Birth: 1935 SD: D
Grade: GS-12 EOD Date: 1962
Number of Students Enrolled: 6 Date of Course: 7/26 - 8/8/76

COURSE OBJECTIVES--CONTENT AND METHODS

The Workshop objectives provide participants with a knowledge of the major principles, methods, and practices of effective instruction, and an opportunity to develop skills as an instructor by applying this knowledge in an instructional setting. Participants are able to analyze their audience and teaching objectives, prepare lesson plans, effectively present the material to be learned, and then evaluate the results of their training efforts.

The instruction required maximum student involvement with major emphasis on the application of instructional methods in the students presentation of units of instruction. Students were not graded during the Workshop, but they were constructively evaluated by the instructor and fellow participants both verbally and through the use of video tape.

Students were required to give a fifteen-minute lecture, a twenty-minute demonstration, and a fifty-minute lesson in his basic subject.

ACHIEVEMENT RECORD

This is a certificate of attendance only, since examinations are not used in the course.

FOR THE DIRECTOR OF TRAINING

11/10/76 *Stanley W. Specker*
DATE STANLEY W. SPECKER
Chief Instructor

E 2 IMPDET CL BY 010628

C-O-N-F-I-D-E-N-T-I-A-L

ADMINISTRATIVE
Internal Use Only

0.361.30
31/135/4534

REPORT OF SERVICE ABROAD											
TO: Office of Personnel, Control Division, Statistical Reporting Branch											
SERIAL NO.		LAST		FIRST		NAME		<div style="border: 2px solid black; padding: 5px; transform: rotate(-5deg); display: inline-block;"> FILE PUNCHED BY </div>			
1-8		(Point)		3-28		MONTH					
036130		FLEANS		DANCE							
INSTRUCTIONS											
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 98, REVISED.											
PCS DATES OF SERVICE											
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION		CODE	38	39	CODE
25-26	27-28	29-30	31-32	33-34	35-36			27			40-42
TDY DATES OF SERVICE											
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - TDY (Basic) 2 - CORRECTION 3 - CANCELLATION		CODE	38	39	CODE
25-26	27-28	29-30	31-32	33-34	35-36			27			40-42
07	16	75	07	19	75			2			811
OFFICE OF PERSONNEL USE ONLY - PUNCH AREA											
SOURCE DOCUMENT AND CERTIFICATION											
<input checked="" type="checkbox"/> TRAVEL VOUCHER <input type="checkbox"/> CABLE <input type="checkbox"/> OTHER (Specify)						DISPATCH DUTY STATUS OR TIME AND ATTENDANCE REPORT					
DOCUMENT IDENTIFICATION NO.						DOCUMENT DATE/PERIOD					
REMARKS											
PREPARED BY			REPORT ANNOTATED ON CONTROL DOCUMENT			ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED					
BLO			DATE			SIGNATURE					
B L DIVISION, CTDR.			11/1/75			R. B. King					
I & T DIVISION											
THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER											

**ADMINISTRATIVE
Internal Use Only**

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

**FILE
PUNCHED
BY**

SERIAL NO. 1-5	NAME	
	LAST (Print)	FIRST 7-24
036130	FLORES	DANIEL

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (Use only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 88, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39	LATIN AMERICAN	40-42
07	25	75	07	29	75		2			805

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.

DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY	<input checked="" type="checkbox"/> REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCB	DATE	SIGNATURE
<input checked="" type="checkbox"/> C & L DIVISION, CTRD.	12/1/75	[Signature]
<input type="checkbox"/> C & T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: **FILE** Office of Personnel Control Division, Statistical Reporting Branch

SERIAL NO.

NAME _____

LAST

5195

MIDDLE

036130

F 2010.5

7-24 DANIEL

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (*One only*). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 50, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE	
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	27 28 29	40-42

TOY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY	ANALYSIS		
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	CODE		WH AREA	CODE	
25-26	27-28	29-30	31-32	33-34	35-36		37	38 39		40-42	
1	2	08	7	5	1		2				8

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	


DOCUMENT IDENTIFICATION NO.

IDENTIFICATION NO.
44-07-76

DOCUMENT DATE/PERIOD

1) L.C. 3-13-75

REMARKS

PREPARED BY		REPORT ANNOTATED IN CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCO			
B & L DIVISION, CTDB.		DATE	SIGNATURE 
C & T DIVISION			

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

**FILE
PUNCHED
BY**

SERIAL NO.

NAME

036130

LAST

FIRST

MIDDLE

(Print)
FLORES

7-28
DANIEL

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 56, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		COUNTRY		CODE	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	CODE	37	38 39			40-42	
25-26	27-28	29-30	31-32	33-34	35-36								

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		COUNTRY		CODE	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	CODE	37	38 39			40-42	
25-26	27-28	29-30	31-32	33-34	35-36								
10	15	75	10	22	75		2			WESTERN HEM.		811	

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify):	

DOCUMENT IDENTIFICATION NO.

LA-145-76

DOCUMENT DATE/PERIOD

10/15-22/75

REMARKS

PREPARED BY

SCO

REPORT INDICATED ON
CONTROL DOCUMENT

ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE
DOCUMENT CITED

C & L DIVISION, CTRD.

DATE

SIGNATURE

C & L DIVISION

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
036130	FLORES	DANIEL	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38 39	40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39	40-42
10	30	75	11	04	75		2		WM BRET 811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.

LA 166-76

DOCUMENT DATE/PERIOD

OCT 30 - NOV 4-75

REMARKS

PREPARED BY	REPORT SUBMITTED ON	ADVISOR DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT FILED
DATE	DATE	

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

FORM 1051a

SECRET

(10-10)

ADMINISTRATIVE
Internal Use Only

SIE

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Report

**FILE
PUNCHED
BY**

SERIAL NO.

NAME

LAST

FIRST

I-O

(PRINT)

7-24

036130

ELIAS

SMITH

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 80, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	D/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	D/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39	LATIN AMERICAN	40-42
08	16	75	09	02	75		2			805

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.

DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY	REPORT APPROVED BY	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DATE	DATE	SIGNATURE

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

FORM 151A

ADMINISTRATIVE-Internal Use Only

10-101

SECRET
(When Filled In)

5/15

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical **FILE** **PUNCHED** **BY** **NAME** **MIDDLE**

SERIAL NO.

LAST

FIRST

1-6

(Print)

7-26

036130

Flores

Daniel

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 56, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic)	CODE	37	38	39	CODE
25-26	27-28	29-30	31-32	33-34	35-36	2 - CORRECTION					40-42
						3 - CANCELLATION					

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TDY (Basic)	CODE	37	38	39	CODE
25-26	27-28	29-30	31-32	33-34	35-36	4 - CORRECTION					40-42
						5 - CANCELLATION					

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OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.

DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY	REPORT SUBMITTED BY	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
1-6	DATE	SIGNATURE
<input checked="" type="checkbox"/> C & I DIVISION, CTR.	5/15/75	R. Flores
<input type="checkbox"/> C & P DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

FORM 1451a (1-68) (1-68)

SECRET

18-101

SECRET

OFF

18 NOV 1975

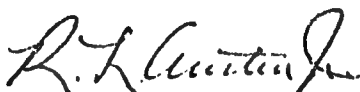
MEMORANDUM FOR THE RECORD

SUBJECT: Meritorious Unit Citation -- Cuban Operations Group,
Latin America Division

On 13 November 1975 the Director of Central Intelligence approved award of the Meritorious Unit Citation to the Cuban Operations Group in recognition of the outstanding performance of the following employees from 1 October 1974 to 30 September 1975:

Felipe Acevedo
Carol A. Barr
Vivian A. Barry
P. Claudette Broyles
Daniel Calloway
Thomas G. Clines
Frank Esquivel
Owen H. Faust
Mary D. Felton
Daniel Flores
Nancy B. Fortson
Ann Goldsworthy
Clyde I. Hinkley
Christine Hopkins
Kathryn Kemp
Myron M. Kline

Barbara Morgenthauer
Mary Muldoon
Mary Musgrave
Sylvia Palmer
Elizabeth Reilly
Carol Rhodes
Nestor D. Sanchez
Joan Silverlieb
Allen Smith
John Blake Smith
Priscilla Tench
Len Therry
Mary A. Velous
Donald Venute
William Watkins
Anne Zimmerman



R. L. Austin, Jr.
Recorder

Honor and Merit Awards Board

Distribution:

- 1 - Each OFF
- 1 - C/LA
- 1 - Recorder/HMAB
- 1 - Exec Sec/HMAB

SECRET

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ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

**FILE
PUNCHED
BY/6**

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	NAME
1-5 36130	LAST (Print) ELCZER FIRST (Print) DANIEL

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58 REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE				CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37	38	39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE				CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - TDY (Basic) 2 - CORRECTION 3 - CANCELLATION	37	38	39		40-42
07	04	75	07	14	75		2			WH	811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.

DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY	<input checked="" type="checkbox"/> REPORT SUBMITTED TO CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT - BASED UPON SOURCE DOCUMENT CITES
DATE	7/15/75	SIGNATURE

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET
(When Filled In)

FILE

POSTED
BY/4

REPORT OF SERVICE ABROAD

TO:

Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO. -

NAME

LAST

FIRST

MIDDLE

036130

Flores

Daniel

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic)	CODE	37	38	39	CODE
25-26	27-28	29-30	31-32	33-34	35-36	3 - CORRECTION					40-42
			03	05	74	3 - CANCELLATION	1				Peru 570

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TDY (Basic)	CODE	37	38	39	CODE
25-26	27-28	29-30	31-32	33-34	35-36	4 - CORRECTION					40-42
						5 - CANCELLATION					

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
<input checked="" type="checkbox"/> CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. 185131	DOCUMENT DATE/PERIOD
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REMARKS

PREPARED BY	REPORT ADAPTED OR CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCO	DATE 3/28/74	SIGNATURE [Signature]
C & L DIVISION, CTDO.		
C & S DIVISION		

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IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

**ADMINISTRATIVE
Internal Use Only**

S/E

REPORT OF SERVICE ABROAD

**FILE
PUNCHED
BY**

TO: Office of Personnel, Control Division, Statistical Reporting

SERIAL NO.

NAME

LAST

FIRST

036130

FLORES

DANIEL

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38-39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38-39		40-42
10	05	74	10	07	74		2		Europe	801

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.

WH 119-75

DOCUMENT DATE/PERIOD

10/4 - 10/2/74

REMARKS

PREPARED BY	<input checked="" type="checkbox"/> REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DATE	SIGNATURE	
12/23/74	Daniel L. Harner	

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

FORM 1451a

ADMINISTRATIVE-Internal Use Only

(4-10)

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Transactions and Records Branch, States Section

**FILE
SUBMITTED
BY** *12*

SERIAL NO.	NAME
1-6	LAST FIRST MIDDLE
<i>025 2</i>	<i>FLORES 12-14 1961</i>

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 59, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	CODE	37 38 39		CODE 40-42
25-26	27-28	29-30	31-32	33-34	35-36		37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	CODE	37 38 39		CODE 40-42
25-26	27-28	29-30	31-32	33-34	35-36		37	38 39		40-42
07	07	74	07	11	74		2		62 H	811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
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REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
SEC	DATE <i>9/10/64</i>	SIGNATURE <i>John C. Smith</i>
C & L DIVISION, CTRD.		
C & T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

**FILE
PUNCHED
BY**

TO: Office of Personnel, Control Division, Statistical Reporting

SERIAL NO.	NAME
1-6 036130	LAST FIRST MIDDLE (Print) FLORES DANIEL

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFF NO. 58 REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic)	CODE	37	38	39	CODE
25-26	27-28	29-30	31-32	33-34	35-36	3 - CORRECTION	37	38	39		40-42
25-26	27-28	29-30	31-32	33-34	35-36	5 - CANCELLATION					

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TDY (Basic)	CODE	37	38	39	CODE
25-26	27-28	29-30	31-32	33-34	35-36	4 - CORRECTION	37	38	39		40-42
06	13	74	06	21	74	5 - CANCELLATION	2				P/1

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. 6A 542-74	DOCUMENT DATE/PERIOD 6/13-6/21/74
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REMARKS

PREPARED BY	DATE	SIGNATURE
	9 May 74	

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

14-00000

SECRET

ADMINISTRATIVE
Internal Use Only

S/E

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.

NAME

1-6
036130

LAST

FIRST

(Print)

FLORES

3-24

DANIEL

**FILE
PUNCHED
BY**

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58 REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39		40-42
08	12	74	08	16	74	2			LA AREA	811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> Other (Specify)	

DOCUMENT IDENTIFICATION NO.

DOCUMENT DATE PERIOD

12-17 June 74

WITNESSES

PREPARED BY	REVIEWED BY	APPROVED BY

THIS REPORT SHALL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

10010

ADMINISTRATIVE-Internal Use Only

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE				
DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY		
1. NAME OF EMPLOYEE (use pseudo only if SA)	2. DATE (from item 3-1)	3. NAME OF SUPERVISOR (true)	4. DATE (from item 3-2)	
Daniel Flores	27 Feb 73	Richard Welch	27 Feb 73	
5. DATE RECEIVED AT HEADQUARTERS:		6. DISPATCH NUMBER:		7. DATE RECEIVED BY CARRIER SERVICE:
2 March 1973		HPLT-6502		
TO BE COMPLETED BY EMPLOYEE				
1. DATE OF BIRTH	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE	4. STATION OR BASE	5. CRYPT FOR CURRENT COVER
4 Aug 1935		GS-11 FI Case Officer	Lima	LN Fall
6A. DATE OF PCS ARRIVAL IN FIELD	6B. REQUESTED DATE OF DEPARTURE	6C. EXPECTED DATE OF FIRST CHECK-IN AT HQ	6D. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE	
24 Sept 1971	30 Nov 1974	1 Feb 1975	15 Feb 1975 (depending on training.)	
7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:				
Wife: 37, daughter: 3				
8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:				
None				
9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-P 240-8)				
<p>September 1971 - July 1972 - Activities of the Communist Party and extreme leftist groups. Labor activities. Preparation of project outlines and progress reports.</p> <p>August 1972 - Present - Chinese Operations. News media capability. Preparation of project outlines and progress reports.</p>				
10. TRAINING DESIRED: INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS				
<p>In the near future I would like to take an advanced operations course. In connection with this, I would like to concentrate on the Soviet and Chinese targets in Latin America. Special courses in these two areas would be extremely helpful. Some time in the future I would like to attend the mid-career course.</p>				

FORM 702

SECRET

SECRET

11. PREFERENCE FOR NEXT ASSIGNMENT

11A. DESCRIBE BRIEFLY THE TYPE OF WORK YOU WOULD PREFER FOR NEXT ASSIGNMENT IF DIFFERENT FROM THAT INDICATED IN ITEM NO. 9 ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICE.

At this point in my career the Soviet and Chinese targets are of major interest to me. Although I would prefer to work on Chinese operations in my next assignment, as an alternative I would consider working on Soviet operations.

11B. INDICATE IF YOU DESIRE TO EXTEND YOUR CURRENT TOUR BY CHECKING IN APPROPRIATE BOX. ALSO INDICATE PREFERENCE FOR NEXT REGULAR ASSIGNMENT BY INSERTING 1, 2, & 3 (for 1st, 2nd, and 3rd choice) IN REMAINING BOXES. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR.

☒ EXTEND TOUR 14 MONTHS AT CURRENT STATION TO 31 November 1974
(date)

☐ BE ASSIGNED TO HQTRS FOR A TOUR OF DUTY. INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE.
1ST CHOICE _____ 2ND CHOICE _____ 3RD CHOICE _____

☒ BE ASSIGNED TO ANOTHER FIELD STATION. INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIALIZATION
1ST CHOICE Caracas 2ND CHOICE Mexico 3RD CHOICE Buenos Aires

☐ RETURN TO MY CURRENT STATION

TO BE COMPLETED BY FIELD STATION

12. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE AND HIS PREFERENCE FOR NEXT ASSIGNMENT, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:

Concur. This officer is doing a good job on his assigned targets and his overall abilities give the Station a flexibility it often needs to call on.

TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

13. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF YOUR COMPONENT, INDICATE YOUR COMPONENT'S RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

Subject's tour has been extended fourteen months to 31 November 1974.

DATE 4/23/73 TITLE C/MH/Pers SIGNATURE H. L. Beythold

FOR USE BY CABLE SERVICE

14. APPROVED ASSIGNMENT:

15. EMPLOYEE NOTIFIED BY DISPATCH NO. HPIS-3284 DATE (typed) 23 Apr 73

CABLE NO. _____ DATE: _____

CABLE SERVICE REPRESENTATIVE: _____ DATE: _____

SECRET

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD																																			
<div style="float: right; border: 1px solid black; padding: 5px; text-align: center;"> FILE PUNCHED BY </div>																																			
TO: Office of Personnel, Transactions and Records Branch, Status Section																																			
SERIAL NO.		NAME																																	
1-6		LAST			FIRST			MIDDLE																											
036130		(Print) FLORES			7-24 DANIEL																														
INSTRUCTIONS																																			
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PCS DATES OF SERVICE																																			
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		COUNTRY																								
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic)	2 - CORRECTION	3 - CANCELLATION	1988	38	38	CODE																							
25-26	27-28	29-30	31-32	33-34	35-36				97	38	38	40-42																							
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TDY DATES OF SERVICE																																			
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		AREA(S)																								
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - TDY (Basic)	2 - CORRECTION	3 - CANCELLATION	1988	38	38	CODE																							
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OFFICE OF PERSONNEL USE ONLY - PUNCH AREA																																			
SOURCE DOCUMENT AND CERTIFICATION																																			
TRAVEL VOUCHER						DISPATCH																													
CABLE						DUTY STATUS OR TIME AND ATTENDANCE REPORT																													
OTHER (Specify)																																			
DOCUMENT IDENTIFICATION NO.						DOCUMENT DATE/PERIOD																													
16318						28 May 1971																													
REMARKS																																			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">PREPARED BY</td> <td colspan="2">REPORT SUBMITTED BY</td> <td colspan="2">ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED</td> </tr> <tr> <td>1-6</td> <td></td> <td>1-6</td> <td></td> <td colspan="2"></td> </tr> <tr> <td>1-6</td> <td>1-6</td> <td>1-6</td> <td>1-6</td> <td colspan="2"></td> </tr> <tr> <td>1-6</td> <td>1-6</td> <td>1-6</td> <td>1-6</td> <td colspan="2"></td> </tr> </table>												PREPARED BY		REPORT SUBMITTED BY		ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED		1-6		1-6				1-6	1-6	1-6	1-6			1-6	1-6	1-6	1-6		
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THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER																																			

SECRET

(When filled in)

SERVICE ABROAD AGREEMENT

I. GENERAL

IT IS UNDERSTOOD THAT YOU AGREE TO SERVE THE PERIOD OF SERVICE ABROAD PRESCRIBED IN SECTION II BELOW AND THAT THE GOVERNMENT IS OBLIGATED TO RETURN YOU, YOUR DEPENDENTS AND YOUR HOUSEHOLD AND PERSONAL EFFECTS UPON THE SATISFACTORY COMPLETION OF THIS PERIOD. YOUR ALLOWABLE EXPENSES WILL BE DETERMINED IN ACCORDANCE WITH AGENCY REGULATIONS.

IF YOU TERMINATE YOUR PERMANENT ASSIGNMENT OUTSIDE THE CONTINENTAL UNITED STATES BEFORE YOU COMPLETE 12 MONTHS OF CREDITABLE SERVICE FOLLOWING THE DATE OF YOUR ARRIVAL ABROAD, YOU WILL BE REQUIRED TO REIMBURSE THE GOVERNMENT FOR ALL EXPENSES IT INCURS IN THE TRAVEL AND TRANSPORTATION OF YOU, YOUR DEPENDENTS, YOUR HOUSEHOLD AND PERSONAL EFFECTS TO YOUR POST. IF YOU FAIL TO COMPLETE YOUR PRESCRIBED TOUR OF DUTY ABROAD YOU WILL NOT BE ENTITLED TO THE RETURN TRAVEL AND TRANSPORTATION OF YOURSELF, YOUR DEPENDENTS AND YOUR HOUSEHOLD AND PERSONAL EFFECTS TO THE UNITED STATES. IF, HOWEVER, AGENCY OFFICIALS DETERMINE THAT YOUR EARLY DEPARTURE IS NECESSARY FOR OFFICIAL REASONS, OR FOR PERSONAL REASONS OF SIGNIFICANT INTEREST TO THE GOVERNMENT, THEY MAY WAIVE THE REIMBURSEMENT OF EXPENSES ALREADY INCURRED, OR AUTHORIZE YOUR RETURN TRAVEL AND TRANSPORTATION, WHICHEVER IS APPLICABLE.

IF ELIGIBLE UNDER THE TERMS OF HR 20-30, YOU WILL BE GRANTED HOME LEAVE AS SOON AS IT CAN BE ARRANGED AT GOVERNMENT CONVENIENCE AFTER COMPLETION OF YOUR PRESCRIBED TOUR OF DUTY, PROVIDED YOU HAVE SERVED AT LEAST 12 MONTHS OF CONTINUOUS CREDITABLE SERVICE OUTSIDE THE UNITED STATES. HOME LEAVE AND HOME LEAVE TRAVEL ARE CONTINGENT UPON YOUR WILLINGNESS TO RETURN, AND CONTINGENT UPON AGENCY OFFICIALS THAT YOU WILL RETURN TO SERVICE OUTSIDE THE UNITED STATES IMMEDIATELY AFTER HOME LEAVE OR UPON COMPLETION OF AN ASSIGNMENT IN THE UNITED STATES.

YOU ARE ADVISED THAT ANY MONIES DUE YOU FROM THE GOVERNMENT MAY BE APPLIED IN LIQUIDATION OF ANY INDEBTEDNESS ARISING FROM VIOLATION OF THIS AGREEMENT. YOU WILL BE AFFORDED ALL NORMAL RECOURSE IN APPEALING DECISIONS MADE PURSUANT TO THIS AGREEMENT.

NAME OF EMPLOYEE

Daniel Flores

SO

D

II. TOUR OF DUTY ABROAD

1. NAME OF POST OF ASSIGNMENT

Currently Guayaquil, Ecuador

and Next Assignment: Lima Peru

2. PERIOD OF SERVICE ABROAD AS PRESCRIBED IN A, B, OR C BELOW

A. STANDARD TOUR OF DUTY OF 24 MONTHS

X

C. NONSTANDARD TOUR OF DUTY OF _____ MONTHS FOR THIS TOUR ONLY FOR THE EMPLOYER SIGNING THIS AGREEMENT. (See HR 20-18)

REQUESTED (Memo attached)

OPERATING OFFICIAL

B. NONSTANDARD TOUR OF DUTY OF _____ MONTHS PREVIOUSLY APPROVED PER HR 20-18.

CONCUR

CAREER SERVICE

DEPUTY DIRECTOR

OPERATING OFFICIAL

Jen Huey, HC/44/Pos

APPROVED

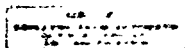
DIRECTOR OF PERSONNEL

III. PERMANENT PLACE OF RESIDENCE

3. YOUR "PERMANENT PLACE OF RESIDENCE" IS A PLACE TO WHICH ALLOWABLE TRAVEL AND TRANSPORTATION EXPENSES MAY BE AUTHORIZED IN CERTAIN CIRCUMSTANCES PURSUANT TO HR 22. ITS DESIGNATION WILL BE KEPT IN YOUR OFFICIAL PERSONNEL FOLDER.

4. IN REQUESTING YOUR PERMANENT PLACE OF RESIDENCE IN ITEM 5 ON THE REVERSE SIDE, YOU WILL (FOR STANDARD IN HR 22-3) NORMALLY INDICATE THE PLACE WHERE YOU PHYSICALLY RESIDE IN THE UNITED STATES, ITS POSSESSIONS OR THE COMMONWEALTH OF PUERTO RICO AT THE TIME OF YOUR PLS TRANSFER TO A POST ABROAD. YOU MAY REQUEST IN ITEM 6 THE DESIGNATION OF ANOTHER PLACE AS YOUR PERMANENT PLACE OF RESIDENCE IF YOU CAN ESTABLISH THAT YOUR PHYSICAL RESIDING PLACE IS (OR WAS) TRANSIENT AND THAT SUCH OTHER PLACE IS YOUR DOMICILE OR WAS PREVIOUSLY BEEN USED BY YOU AS A PHYSICAL RESIDENCE. INFORMATION THAT CAN BE PRESENTED IN AN ATTACHED STATEMENT AS EVIDENCE INCLUDES BUT IS NOT LIMITED TO, STATE VOTING REGISTRATION, PROPERTY OWNERSHIP AND PLACE WHERE INCOME OR PERSONAL PROPERTY TAXES HAVE BEEN PAID.

SECRET



CONTINUED ON THE REVERSE

SECRET
(When Filled In)

3. PHYSICAL DETAILING PLANS (Permanent Place of Residence unless address in item 6 is approved in lieu thereof) FULL ADDRESS: <p align="center">Washington, D. C.</p>		6. OTHER PLACE REQUESTED (Requested Permanent Place of Residence if different from item 3) FULL ADDRESS: 	
<div style="text-align: right;">APPROVED</div> <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> DEPUTY DIRECTOR <i>A. Bury</i> </div> <div style="width: 20%;"> DATE 5-20-71 </div> </div>		<div style="text-align: center;">CONCUR</div> <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> DEPUTY DIRECTOR </div> <div style="width: 20%;"> DATE </div> </div> <div style="text-align: right;">APPROVED</div> <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> DIRECTOR OF PERSONNEL </div> <div style="width: 20%;"> DATE </div> </div>	
IV. HOME LEAVE POINT			
7. AMONG THE PLACES YOU MAY REQUEST AS A HOME LEAVE POINT ARE: YOUR PERMANENT PLACE OF RESIDENCE SHOWN ABOVE, HEADQUARTERS AREA, AND WHERE YOUR CHILDREN, PARENTS, PARENTS-IN-LAW, BROTHERS, SISTERS, BROTHERS-IN-LAW, OR SISTERS-IN-LAW RESIDE.			
8. YOU MAY REQUEST FOR APPROVAL SOME OTHER POINT SUBJECT TO THE PROVISIONS OF HR 20-30B(3)(C). THE REQUEST MUST BE ACCOMPANIED BY A MEMORANDUM EXPLAINING THE CIRCUMSTANCES.			
9. DESIGNATION PER ITEM 7 ABOVE FULL ADDRESS: <p align="center">4505 Washington Street Milwaukie, Oregon</p>		10. DESIGNATION PER ITEM 8 ABOVE. FULL ADDRESS: 	
RELATIONSHIP OF RELATIVE AT HOME LEAVE POINT <p align="center">Parents-in-law</p>		<div style="text-align: center;">CONCUR</div> <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> DEPUTY DIRECTOR </div> <div style="width: 20%;"> DATE </div> </div> <div style="text-align: right;">APPROVED</div> <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> DEPUTY DIRECTOR <i>A. Bury</i> </div> <div style="width: 20%;"> DATE 5-20-71 </div> </div>	
EMPLOYEE CERTIFICATION			
I have read and understand my service obligations and travel entitlements as described in this agreement.			
SIGNATURE OF EMPLOYEE <p align="center">See Dispatch Attached <i>Daniel Ob...</i></p>		DATE <p align="center">5/20/71</p>	

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(When Filled In)

RESIDENCE AND DEPENDENCY REPORT

AN ORIGINAL OF THIS FORM WILL BE EXECUTED BY EACH EMPLOYEE AT THE TIME OF HIS APPOINTMENT AND WHEN A CHANGE OCCURS IN THE INFORMATION SHOWN BELOW. ITEMS OF CHANGE MAY BE REPORTED IN THE APPROPRIATE BLOCKS WITHOUT COMPLETING THE REMAINDER OF THE FORM EXCEPT THE EMPLOYEE'S SIGNATURE AND DATE. WHEN EXECUTING ITEM 4 ALSO COMPLY WITH HRG 20-7. PERSONNEL EMERGENCY AND LOCATOR RECORDS. THIS FORM WILL BE COMPLETED ONLY BY HEADQUARTERS PERSONNEL--AND NOT SENT TO THE FIELD. FORM WILL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.

GENERAL

NAME OF EMPLOYEE (Last)	(First)	(Middle)	SOCIAL SECURITY NUMBER
FLORES	Daniel		460-48-6230

1. MARITAL STATUS (check one)

SINGLE	<input checked="" type="checkbox"/> X	MARRIED	<input type="checkbox"/>	SEPARATED	<input type="checkbox"/>	DIVORCED	<input type="checkbox"/>	WIDOWED	<input type="checkbox"/>	ANNULLED	<input type="checkbox"/>
--------	---------------------------------------	---------	--------------------------	-----------	--------------------------	----------	--------------------------	---------	--------------------------	----------	--------------------------

IF MARRIED, PLACE OF MARRIAGE: Lima, Peru

DATE OF MARRIAGE: 18 November 1960

IF DIVORCED, PLACE OF DIVORCE DECREE: N/A

DATE OF DECREE:

2. MEMBERS OF FAMILY

NAME OF SPOUSE	ADDRESS (No., Street, City, State, Zip Code)	TELEPHONE NO.
Dorothy A. Flores	The American Embassy, Lima, Peru	
NAME OF CHILDREN	ADDRESS	SEX
Kendra Flores	(Same as above.)	F
		DATE OF BIRTH
		3 March 1971
NAME OF FATHER (or male guardian)	ADDRESS	TELEPHONE NO.
Jose S. Flores	Box 39, Gonzales, Texas 78629	512-672-6061
NAME OF MOTHER, INCLUDING MAIDEN NAME (or female guardian)	ADDRESS	TELEPHONE NO.
Agustina Flores (Deceased)		

WHAT MEMBER(S) OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY.

Mr. Lonnie G. Bruce

3. OTHER RELATIVES WHO ARE DEPENDENT UPON ME FOR AT LEAST 51% OF THEIR SUPPORT AND MEET OTHER REQUIREMENTS IN TRAVEL REGULATIONS (HR 22-15). SPECIFY NAMES AND RELATIONSHIPS.

NAME	DATE OF BIRTH	RELATIONSHIP

4. PERSON RESIDING IN U.S. TO BE NOTIFIED IN CASE OF EMERGENCY

NAME (Mr., Mrs., Miss)	RELATIONSHIP
Mr. Lonnie G. Bruce	Brother-in-law
HOME ADDRESS (No., Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE	HOME TELEPHONE NUMBER
973 E. Walnut St., Seguin, Texas 78155	512-379-7620
BUSINESS ADDRESS (No., Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE	BUSINESS TELEPHONE & EXTENSION

IS THE INDIVIDUAL NAMED ABOVE SITTING OF YOUR AGENCY AFFILIATION? (If "No" give name and address of organization he belongs you work for.)

YES ☒ X
NO ☐

IS THE INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF IN THE EVENT YOU ARE INCAPABLE? (If "No" give name and address of person, if any, who can make such decisions in case of emergency.)

YES ☐
NO ☒ X

Dorothy A. Flores The American Embassy Lima, Peru

DID THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer is "No" explain why in item 6.)

YES ☒ X
NO ☐

The persons named in item 2 or 3 above may also be notified in case of emergency. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 6 ON THE REVERSE SIDE OF THIS FORM.

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(When Filled In)

5. VOLUNTARY ENTRIES		
<p>Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.</p>		
<p>INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.</p> <p align="center">The Riggs National Bank, Federal Office, 1750 Pennsylvania Avenue, N.W., Washington D.C.</p>		
<p>ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>		
<p>IF YES, DO YOU HAVE A JOINT ACCOUNT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p>		
<p>HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO. (If "Yes" where is document located?)</p>		
<p>HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. (If "Yes" give name(s) and address)</p>		
<p>HAVE YOU EXECUTED A POWER OF ATTORNEY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. (If "Yes", who possesses the power of attorney?)</p>		
6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS		
7. RESIDENCE DATA - TO BE COMPLETED ONLY BY EMPLOYEES ENTERING ON DUTY (No Approval Required)		
<p>RESIDENCE WHEN EMPLOYED (Full Address)</p>	<p>PERMANENT PLACE OF RESIDENCE AS DEFINED IN HR 22-3 (Full Address)</p>	
8. CHANGE IN PERMANENT PLACE OF RESIDENCE (See HR 22-3) (To Be Completed by Employee Desiring Such Change While Assigned to Headquarters)		
<p>FULL ADDRESS</p>	<p>DEPUTY DIRECTOR OR DESIGNEE</p>	<p>DATE</p>
	<p>DIRECTOR OF PERSONNEL (when applicable per HR 22-3)</p>	<p>DATE</p>
<p>SIGNED AT <i>Headquarters</i></p>	<p>DATE <i>7 June 49</i></p>	<p>SIGNATURE <i>Clair D. Over</i></p>

CONFIDENTIAL

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE				
DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY		
NAME OF EMPLOYEE (use pseudo only if SA)	DATE (from item 5-D)	NAME OF SUPERVISOR (true)	DATE (from item 5-2)	
Daniel Flores		Robert Fambrini		
DATE RECEIVED AT HEADQUARTERS:	DISPATCH NUMBER:	DATE RECEIVED BY CAPTER SERVICE:		
30 October 1970	HEQT 1506	04 MAR 1971		
TO BE COMPLETED BY EMPLOYEE				
1. DATE OF BIRTH	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE	4. STATION OR BASE	5. COVERT FOR CURRENT COVER
4 August 1935		Operational Officer GS-10	Guayaquil	ENCUFF
6A. DATE OF PCS ARRIVAL IN FIELD	6B. REQUESTED DATE OF DEPARTURE	6C. EXPECTED DATE OF FIRST CHECK-IN AT HQ	6D. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE	
13 May 1969	15 May 1971	1 June 1971	1 August 1971	
7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:				
Spouse (Expecting child in March 1971)				
8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:				
NA				
9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-P 240-8)				
Case Officer responsibilities including running project targetted against subversive individuals and organizations; agent handling including penetration agents; responsibility for audio operations and related support agents; preparation of intelligence reports, dispatches and other reports related to Case Officer duties.				
10. TRAINING DESIRED: INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS				
1. Soviet Operations Course. (If possible, I would like to co-ordinate this course with my home leave in the summer of 1971.)				
2. Language training. Preferably Portuguese because I would like to serve in Brazil sometime in the future.				

SECRET

11. PREFERENCE FOR NEXT ASSIGNMENT:

11a. DESCRIBE BRIEFLY THE TYPE OF WORK YOU WOULD PREFER FOR NEXT ASSIGNMENT IF DIFFERENT FROM THAT INDICATED IN ITEM NO. 9 ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICE.

I would like a position of increased responsibility, preferably as a Case Officer for Soviet Operations in Latin America. If this is possible I would like to take the Soviet Operations Course at Headquarters prior to my next assignment.

11b. INDICATE IF YOU DESIRE TO EXTEND YOUR CURRENT TOUR BY CHECKING IN APPROPRIATE BOX. ALSO INDICATE PREFERENCE FOR NEXT REGULAR ASSIGNMENT BY INSERTING 1, 2, & 3 (for 1st, 2nd, and 3rd choice) IN REMAINING BOXES. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR.

- ☐ EXTEND TOUR _____ MONTHS AT CURRENT STATION TO _____ (DATE)
- ☐ BE ASSIGNED TO HQTRS FOR A TOUR OF DUTY: INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE.
1ST CHOICE _____ 2ND CHOICE _____ 3RD CHOICE _____
- ☐ BE ASSIGNED TO ANOTHER FIELD STATION: INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIALIZATION
1ST CHOICE Caracas, Venc 2ND CHOICE Mexico 3RD CHOICE Lima, Peru
- ☐ RETURN TO MY CURRENT STATION

TO BE COMPLETED BY FIELD STATION

12. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE AND HIS PREFERENCE FOR NEXT ASSIGNMENT, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

It is believed that this officer's performance at his present post of assignment has provided sufficient indication of his competence as a field case officer, and that he should have no problem filling a Soviet Operations Officer slot at a medium sized field installation. He should attend the Soviet Operations Course prior to such assignment.

TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

13. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF YOUR COMPONENT, INDICATE YOUR COMPONENT'S RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

WH Division has selected Mr. Flores for assignment to Lima in September 1971.

DATE 1 March TITLE C/WH/Peru SIGNATURE H. L. Burthold

FOR USE BY CAREER SERVICE

14. APPROVED ASSIGNMENT:

15. EMPLOYEE NOTIFIED BY DISPATCH NO. _____

FILE NO. 113900

DATE: _____
DATE: _____

16. CAREER SERVICE REPRESENTATIVE _____

SECRET

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

**FILE
PUNCHED
BY RT**

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO.

NAME

LAST

FIRST

MIDDLE

036130

(Print) Flores

7-24 Daniel

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37	38 39		40-42
05	13	69					1		Ecuador	175

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 5 - CANCELLATION	37	38 39		40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input checked="" type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.

21157300

DOCUMENT DATE/PERIOD

12 May 1967

REMARKS

PREPARED BY	REPORT ORIGINATED ON	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DATE	SIGNATURE	
10 MAY 1967	10 MAY 1967	

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET

Not Approved by
CS Career Service

81 JAR pm

MEMORANDUM FOR: Secretary, CSCS Panel (Section C)

SUBJECT : Recommendation for Promotion to Grade
GS-10, Daniel Flores

1. It is recommended that Mr. Daniel Flores be promoted from GS-09 to GS-10.

2. Mr. Flores joined the Agency in 1962; initially he was employed on a part-time basis in the MI Division while attending the American University. He received his AB degree in 1967 and became a full-time staff employee. On the strong recommendation of his supervisors, Mr. Flores was accepted for the Career Training Program which he completed in August 1968. After rejoining the MI Division, he was selected for assignment as an operations officer at the Guayaquil Base where he arrived in May 1969. Mr. Flores is bi-lingual in Spanish.

3. Both as a Headquarters and field operations officer Mr. Flores has carried out his assignments with intelligence, enthusiasm and initiative. As the Guayaquil Base officer in charge of Communist penetration operations, his performance has been of high caliber. In August 1969, during the forced absence of the Chief of Base and other senior officers, Mr. Flores assumed the full responsibilities for running the base for a period of several weeks. He performed the duties of Acting Chief of Base in a superior manner. In addition to his operational competence, the Guayaquil Chief of Base has observed that Mr. Flores' ability to develop social relations with ease has been a distinct asset for the Base.

4. Mr. Flores has already proven to be a competent operations officer. As he further develops through experience and responsibility he should become eligible for rapid advancement. In any case he is already performing at a level far higher than his current grade and a promotion at this time is strongly recommended.

William V. Broe
William V. Broe
Chief
Western Hemisphere Division

SECRET

CONFIDENTIAL
(When filled in)

IMPORTANT

Central Processing Branch has been charged with responsibility for ensuring that all employees processing PCS to the field have reviewed the field version of the Employee Conduct Handbook. You will not be checked out for your proposed travel until you sign the following statement and return it to CPB. Your Personnel Officer can provide you with a copy of the Handbook.

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Field Handbook 20-4, Employee Conduct, dated 23 October 1964.


Signature

DANIEL FLORES


Date

CONFIDENTIAL

Group 1 - Excluded from
automatic downgrading
and declassification.

CONFIDENTIAL

(When Filled In)

Complete in original. The data recorded on this form is essential in determining travel expenses allowable in connection with leave at government expense, overseas duty, return to residence upon separation, and for providing current residence and dependency information required in the event of an employee emergency. This form will be filed in the employee's official personnel folder.

NAME OF EMPLOYEE (Last) (First) (Middle) SOCIAL SECURITY NUMBER
 Flores, Daniel 460-42-6230

1. RESIDENCE DATA

PLACE OF RESIDENCE WHEN INITIALLY EMPLOYED BY AGENCY LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad)

Washington, D.C.

PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE HOME LEAVE RESIDENCE

Washington, D.C. Washington, D.C.

2. MARITAL STATUS (Check one)

☐ SINGLE ☒ MARRIED ☐ SEPARATED ☐ DIVORCED ☐ WIDOWED ☐ ANNULLED

IF MARRIED, PLACE OF MARRIAGE DATE OF MARRIAGE

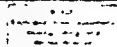
Lima, Peru 14 Dec 1960

IF DIVORCED, PLACE OF DIVORCE DECREE DATE OF DECREE

IF WIDOWED, PLACE SPOUSE DIED DATE SPOUSE DIED

IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S)

CURRENT RESIDENCE AND DEPENDENCY REPORT



CONFIDENTIAL

(When Filled In)

VOLUNTARY ENTRIES

Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.

INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.

Riggs National Bank : Daniel and Dorothy A. Flores
17th and Penn. Avenues, Washington, D.C.
(1750 Penn Avenue)

ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION?

☒ YES ☐ NO

IF YES, DO YOU HAVE A JOINT ACCOUNT?

☐ YES ☒ NO

HAVE YOU COMPLETED A LAST WILL AND TESTAMENT?

☒ YES ☐ NO. (If "Yes" where is document located?)

At home. Will leave with responsible person for safe keeping.

HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS?

☐ YES ☐ NO. (If "Yes" give name(s) and address)

N/A

HAVE YOU EXECUTED A POWER OF ATTORNEY?

☐ YES ☒ NO. (If "Yes", who possess the power of attorney?)

But may before I leave.

6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

My father should not be notified in case of an emergency because of his health and age.

SIGNED AT

DATE

7 April 1969

SIGNATURE

Daniel Flores

CONFIDENTIAL

SECRET

Supplement to Staff Employee Personnel

Action for Integration of Daniel Flores

Effective 10 April 1969

The purpose of this memorandum is to set forth existing policies of concern to you while integrated and to reiterate certain rights and obligations which derive from your true status as an appointed employee. It is hereby agreed and understood that:

1. As an employee of this organization, at the present grade and salary of GS-9 \$8744.00 per annum, you will accept cover employment with another instrumentality of the Government (hereinafter referred to as "your cover facility") effective as of 10 April 1969. You will, insofar as consistent with your basic responsibility to this organization, abide by all the rules, regulations, practices and policies of your cover facility, in order to appear as a conventional member of that establishment. Your appointment to your cover facility is being effected as a PGR-7 at a salary of \$8153.00 per annum. You are prohibited, except as specifically authorized herein, from retaining emoluments paid by your cover facility.

2. It is understood and agreed that the minimum period of your overseas tour of duty is governed by and coincident with the prescribed tour of duty of your cover organization. Currently, your prescribed tour consists of a period of two (2) years from the date of your arrival at your overseas post of duty. Your assignment may be terminated earlier for the convenience of this organization and the length of your tour of duty, as currently specified, may be unilaterally changed by this organization in order to conform with subsequent changes in the prescribed tour of your cover facility. If you request termination of your overseas assignment solely for your own convenience, unless it is for circumstances that are considered by this organization to be beyond your control or if you are terminated for cause under the regulations of this organization before you have completed the minimum period of service prescribed above from the date of arrival at your overseas post of duty, you will not be entitled to return travel or transportation for yourself or your dependents to the United States at Government expense. If you request termination of your overseas assignment solely for your own convenience, unless it is for circumstances that are considered by this organization to be beyond your control or if you are terminated for cause under the regulations of this organization before you have completed one (1) year of service from the date of your arrival at your overseas post of duty you will be required to reimburse the Government for all of its expenses for your travel and transportation, and that of your dependents, from the continental United States to such overseas post of duty.

3. Travel to your post of duty overseas and your return travel to the United States, as well as travel performed overseas which is consistent with your cover designation, will normally be at the direction of your cover facility. Such travel will be accomplished in conformance with applicable

SECRET

regulations of your cover facility except when you are directed for operational reasons to perform travel in accordance with the regulations of this organization.

4. Salary and allowances paid by your cover facility shall be retained by you to the extent that they do not exceed the salary and allowance payment due you on the basis of your grade level with this organization. If such cover payments are less than the amount due you, the difference will be paid to you by this organization. If such cover payments exceed the amount due you, the excess amounts will be remitted to this organization at intervals to be designated by the Office of Finance. Computations hereunder will be based on the aggregate gross amounts due and received. That portion of retirement contributions withheld by your cover facility which exceeds the retirement contributions applicable to your organization salary will be deducted from the gross amount of the overpayment. Upon integration, the payroll office of this organization will establish the date on which you would normally receive a regular step increase from your cover facility. Failure to report a grade promotion received from a cover facility does cause errors in processing regular step increases. Regular step increases, incorrectly processed in such manner, should be reported immediately to this organization. To eliminate this problem, any grade promotion received from a cover facility will be reported immediately by you to this organization's payroll office through channels showing both the old and the new rate and the effective date. All salary difference payments and adjustments will be reflected on earnings statements.

5. Your status as an employee of this organization will continue in full force and effect during your period of duty with your cover facility and you will continue to be entitled to all rights, benefits and emoluments of such status. Certain variations in procedure will be required, however, to preserve the security of your cover position.

a. Upon integrating into your cover facility you will continue to be covered by the particular retirement system in which you are a participant as an employee of this organization. Salary received from your cover facility and any salary differences payable by this organization will be subject to appropriate retirement contributions.

b. Appropriate Federal income tax withholdings shall be made from taxable income received from both your cover facility and this organization. Additionally, while serving in the United States, withholdings shall also be made for District of Columbia or State income tax, when applicable. You may claim reimbursement for excess income taxes paid on overt tax returns by reason of taxable income from your cover facility exceeding the taxable income due you as an employee of this organization.

SECRET


c. All annual and sick leave which is accrued to your credit at the time of integration will be transferred to your cover facility. While integrated you will be permitted annual leave, sick leave, home leave, and leave without pay in accordance with the regulations of your cover facility in lieu of the leave benefits of this organization. Upon termination of your integration, your unused annual leave, sick leave, and home leave will be transferred to your credit with this organization and your leave record will be reconstructed as of the beginning of the leave year in which you return to this organization, as explained in the Handbook on Leave for Special Situations. Serving in an integrated capacity does not permit the carryover from one leave year to another of an annual leave balance which exceeds the ceilings authorized by regulations of this organization and the Federal leave law. If security conditions require that your cover facility make a lump-sum payment for accrued annual leave, upon your "resignation" you will be required to pay the gross amount thereof to this organization, including any income taxes withheld by your cover facility in order to receive credit for such annual leave.

6. You will be required to keep forever secret this agreement and all information which you may obtain by reason hereof, unless you are released in writing by this organization from this obligation. Violation of such secrecy may subject you to criminal prosecution under the espionage laws, as amended, and other applicable laws and regulations. The termination of your employment with this organization will not release you from the obligations of any security oath you may be required to take.

UNITED STATES GOVERNMENT

BY 
Personnel Office

ACCEPTED:



FORM 1535c

SECRET

10-01

ELECTION, DECLINATION, OR WAIVER OF LIFE INSURANCE COVERAGE FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM

**IMPORTANT
AGENCY INSTRUCTIONS
ON BACK OF ORIGINAL**

TO COMPLETE THIS FORM—

1 FOLLOW THESE GENERAL INSTRUCTIONS:

- Read the back of the "Duplicate" carefully before you fill in the form.
- Fill in BOTH COPIES of the form. Type or use ink.
- Do not detach any part.

2 FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):

NAME (last) 036730 (first) Flores (middle) Daniel DATE OF BIRTH (month, day, year) 4 August 1935 SOCIAL SECURITY NUMBER 460 48 6230
EMPLOYING DEPARTMENT OR AGENCY _____ LOCATION (City, State, ZIP Code) _____

3 MARK AN "X" IN ONE OF THE BOXES BELOW (do NOT mark more than one):

Mark here
if you
WANT BOTH
optional and
regular
insurance



ELECTION OF OPTIONAL (IN ADDITION TO REGULAR) INSURANCE

I elect the \$10,000 additional optional insurance and authorize the required deductions from my salary, compensation, or annuity to pay the full cost of the optional insurance. This optional insurance is in addition to my regular insurance.

Mark here
if you
DO NOT WANT
OPTIONAL but
do want
regular
insurance



DECLINATION OF OPTIONAL (BUT NOT REGULAR) INSURANCE

I decline the \$10,000 additional optional insurance. I understand that I cannot elect optional insurance until at least 1 year after the effective date of this declination and unless at the time I apply for it I am under age 50 and present satisfactory medical evidence of insurability. I understand also that my regular insurance is not affected by this declination of additional optional insurance.

Mark here
if you
WANT NEITHER
regular nor
optional
insurance



WAIVER OF LIFE INSURANCE COVERAGE

I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot now or later have the \$10,000 additional optional insurance unless I have the regular insurance.

4 SIGN AND DATE IF YOU MARKED BOX "A" OR "C". COMPLETE THE "STATISTICAL STUD" THEN RETURN THE ENTIRE FORM TO YOUR EMPLOYING OFFICE

Signature of Employee

Daniel Flores
Date *1/10/80*

FOR EMPLOYING OFFICE USE ONLY

(Official stamping date stamp)

See back of Form for instructions on back of Original

When you receive this form, please fill in the following information and return it to the Office of Management Services, Room 400, 1000 ...

OPTIONAL LIFE Insurance is a Federal Employees Benefit

14-00000

S-E-C-R-E-T

- TRAINING REPORT -

Operational Interrogation Course No. 2-69
(Full time - three weeks) 4 - 22 November 1968

Student: Flores, Daniel

Office: WH

Grade : 08

EOD : Mar 62

Number of Students Enrolled: 9

Service Designation: D

COURSE OBJECTIVE

To teach the student to interrogate and to manage interrogation.

RATING

Class Performance : Satisfactory

Interrogation Aptitude: Average

GENERAL CLASS PERFORMANCE

Excellent: 3 Satisfactory: 6 Unsatisfactory: 0

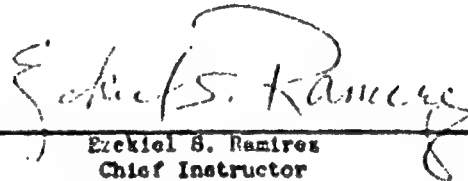
GENERAL CLASS APTITUDE FOR INTERROGATION

High: 2 Average: 6 Low: 1

FOR THE DIRECTOR OF TRAINING:

27 DEC 1968

Date


Ezekiel S. Ramirez
Chief Instructor

S-E-C-R-E-T

C-E-C-R-E-T

TRAINING REPORT OPERATIONS COURSE (FULL TIME)	Course No.		No. of Students		Dates of Course	
	OC-1-3/4-68		Began	Finished	27 May - 16 August 1968	
STUDENT IDENTIFYING INFORMATION						
NAME OF STUDENT	YOB	ECG DATE	OFFICE	GS	SL	
FLORES, Daniel	1934	March 1967	CTP	GS	SL	
PERFORMANCE EVALUATION						

- W - Weak Ranges from inadequate to less than satisfactory (in terms of a new and inexperienced case officer).
- A - Adequate Has achieved the basic level required. Satisfactory, characterized neither by deficiency nor excellence.
- P - Proficient More than satisfactory. Has acquired a solid beginner's proficiency. This rating may be interpreted as representing "average" on our rating scale.
- S - Strong Exceptional proficiency, characterized by thoroughness, initiative, originality, and an exceptional student understanding of the case officer role in clandestine operations.
- O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of other students doing similar work as to warrant special recognition.

COURSE OBJECTIVE

This course is designed to prepare selected staff officers from the Career Trainee Program for field operations officer work with the Clandestine Services. The student's understanding of the Clandestine Services doctrines, policies and operational concepts and his ability to apply these related items is measured by a series of practical exercises. Successful completion of the Operations Familiarization Course (OFC) is a prerequisite for admission to the Operations Course.

RATING LETTER

TRADE CRAFT	P
INTELLIGENCE AND OPERATIONAL INFORMATION REPORTING	P
CLANDESTINE SERVICES OPERATIONAL PROGRAMS	P

The trainee also received basic instruction and practical work in photography, including the use of a 35mm camera and in darkroom procedures; in audio-surveillance, and in the use of S/W and agent radio communications systems. In addition, he was given general familiarization on such subjects as surreptitious entry, documentation and authentication, observation and sketching.

This rating corresponds to the statement which most accurately reflects the student's level of performance and takes into account everything about him which influenced his effectiveness. This rating is a reflection of the degree to which the instructors feel that the student is both suitable and competent for overseas service in the Clandestine Services.

OVERALL PERFORMANCE
P

Overall performance ratings of all students in this class:

WEAK 0 ADEQUATE 0 PROFICIENT 40 STRONG 40 OUTSTANDING 0

C-E-C-R-E-T

S-E-C-R-E-T

NARRATIVE COMMENTS

Significant strengths and weaknesses and their relationship to overall performance in the Operations Course. This section amplifies and explains, as necessary, the rating letters given above.

Mr. Flores' overall performance in this course was at the high proficient level. He is a very friendly and personable individual who put forth a good deal of effort to do well in the course. Mr. Flores takes a very practical approach to solving problems and his attitude throughout the course was excellent.

Mr. Flores acquired a good understanding of the principles and techniques of Clandestine Services operations, and in problems requiring face-to-face encounters with simulated agents in the live exercises he came through as a very friendly and personable individual. He was particularly effective in debriefing situations and demonstrated flexibility in meeting the problems that arose during the simulated agent meetings.

Mr. Flores demonstrated a good understanding of Clandestine Services programs in Foreign Intelligence, Counterintelligence and Covert Action. His performance was graded strong in handling of a simulated walk-in defector, and in a Counterintelligence case study and a Covert Action case study his understanding and analyses were judged highly proficient. He received a rating of adequate in photography.

Mr. Flores has good writing skills and acquired a thorough understanding of intelligence and operational reporting procedures and formats of the Clandestine Services. His intelligence reports were consistently complete, accurate and clear. His operational reports suffered occasionally from weak organization, and on one occasion he had difficulty distinguishing operational from intelligence information; but his reports were generally complete and accurate and showed a sound understanding of operational reporting requirements.

Mr. Flores is a personable and intelligent individual who got along very well with his colleagues and with the instructors. With his excellent attitude and strong desire for a career in the Clandestine Services together with his willingness to work hard, Mr. Flores should have little difficulty in developing into an effective case officer as he gets greater experience.

FOR THE DIRECTOR OF TRAINING:


Arthur P. Fritzell
Chief Instructor

23 August 1968
Date

S-E-C-R-E-T

S-E-C-R-E-T

TRAINING REPORTOperations Course, Phase II-3-68
(416 hours, full-time)4 March - 3 May 1968
(Date)

Student	:	FLORES, Daniel	Office	:	CTP/OTR
Year of Birth:		1935	Service Designation:		BJ
Grade	:	GS-07	No. of Students:		<u>60</u> Began; <u>60</u> Finished
EOD	:	March 1962			

COURSE OBJECTIVES:

The course is designed to prepare junior clandestine services officers for duties related to the conduct of Special Operations. Upon completion of training, the officer will be capable of developing and implementing actions which will contribute to the elimination of subversive insurgency in the underdeveloped area of the world in furtherance of U.S. policy. He shall also be capable of developing plans for the conduct of Special Operations in support of United States military operations in wartime; and will be able to plan for the use of special ground, air, and maritime operations in direct support of other intelligence activities.

ACHIEVEMENT RECORD:

The performance rating and narrative comments below are derived from a synthesis of all observations and evaluations submitted on each trainee by the instructor staff. Student rating is indicated by the asterisk.

INCOMPLETE 0 ADEQUATE 0 PROFICIENT * 48 STRONG 12

NARRATIVE COMMENTS:

Mr. Flores is a self-sufficient, steady worker, who demonstrated an excellent ability to adapt himself to the various training situations. His proficient performance during Operations Course, Phase II-3-68 did not fluctuate appreciably from beginning to end.

Mr. Flores was always mentally alert, receptive to instruction and responsive to instructional exercises. He cheerfully accepted all responsibilities, consistently produced satisfactory results, and appeared to demonstrate a sense of pride in his accomplishments. His conscientious effort, sincerity, and cooperative attitude enabled him to develop a sound working relationship with his colleagues.

Continued on Page 2

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S-E-C-R-E-T

TRAINING REPORT

Operations Course, Phase II-3-68
(416 hours, full-time)

4 March - 3 May 1968

Student : FLORES, Daniel

Office : CTP/OTR

Service Designation: SJ

NARRATIVE COMMENTS (Continued)

Of noteworthy mention was Mr. Flores' pleasant, industrious performance throughout the Jungle Environmental Training in Panama. He established a cheerful environment for his colleagues and completed assigned responsibilities with enthusiasm, determination and cooperation. His sustained high-level performance and ability to adapt to the terrain earned him the respect and appreciation of his classmates.

The degree of performance attained in the course indicates Mr. Flores has gained a sound familiarization of the Special Operations activities, responsibilities, skills, and concepts.

FOR THE DIRECTOR OF TRAINING:


Chief Instructor, Operations Course, Phase II

S-E-C-R-E-T

SECRET

TRAINING REPORT

NAME OF TRAINEE: Flores, Daniel	COURSE: CS RECORDS I & II (Biographic Research)
DOB: 1935 3D: SJ	DATE: 9 - 16 May 1968
OFFICE: CTP GS: 07	HOURS: 30 - part time

OBJECTIVES

1. To provide briefing in the CS requirement for biographic research, the importance of this research in the investigative process, and in the importance of the role of the biographic researcher.
2. To provide instruction in the nature, content and means of access to repositories of biographic information in the CS and other elements of the Agency and the community.
3. To introduce the concept of research and investigation and the processes involved therein, and to provide practical work in research as done at headquarters.
4. To alert the students to the nature of analysis in producing finished reports of biographic research.
5. To provide practice in writing the report of biographic research.

METHOD OF INSTRUCTION

The course is presented by means of lecture, discussion and demonstration. More than fifty percent of the class time is devoted to an exercise in biographic research, an exercise in analysis of the materials recovered, and preparation of a report of the research.

ADJECTIVAL RATINGS USED IN THE TRAINING REPORT

- | | |
|----------------|--|
| EXCELLENT | Student demonstrated unusual competence in achieving the course objectives. His understanding of the course content was unusually thorough and perceptive. Where skills were taught, he demonstrated particular facility in their use. |
| ✓ SATISFACTORY | Student's achievement of the course objectives was competent. He demonstrated good understanding of the course content. Where skills were taught, he demonstrated basic facility in their use. |
| UNSATISFACTORY | Student did not demonstrate adequate competence. Although he may have made some progress, he fell short of the minimum standards for achievement of the course objectives. |

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NARRATIVE RATING OF ACHIEVEMENT:

Mr. Flores showed considerable ability and experience in his handling of the practical problem. He should have no trouble in doing work of this kind with a minimum of supervision.

Overall adjectival rating of achievement:

Satisfactory ✓

Overall adjectival ratings of achievement of all employees in the course:

EXCELLENT: 2 SATISFACTORY: 14 UNSATISFACTORY:

Attendance at this course does not provide the student with operational knowledge and background sufficient to qualify him as an independent researcher, capable of making operational judgments.

NOTE: CS Records I (Introduction to Records) is a prerequisite for this course.

FOR THE DIRECTOR OF TRAINING:

24 MAY 1968

Date



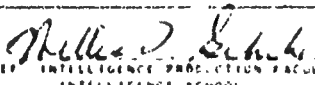
Charles H. Schafer
Chief Instructor

- 2 -

SECRET

SECRET

(When Filled In)

TRAINING REPORT INTELLIGENCE TECHNIQUES COURSE (120 Hours)		COURSE NO. 3-68	NO. STUDENTS 46	DATE OF COURSE 29 Jan - 13 Feb 1968	
IDENTIFYING INFORMATION					
NAME OF STUDENT	YOB	EDD DATE	OFFICE	GS	SD
FLORES, Daniel	35	Mar 1962	CTP	07	SJ
KEY TO RATINGS					
<p>W - Weak Ranges from inadequate to less than satisfactory.</p> <p>A - Adequate Has achieved the basic level required. Satisfactory, characterized neither by deficiency nor excellence.</p> <p>P - Proficient More than satisfactory. Has acquired a solid beginner's proficiency.</p> <p>S - Strong Exceptional proficiency. Characterized by thoroughness, initiative, originality, and an exceptional student understanding of the work involved in intelligence production.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
EVALUATION OF PERFORMANCE IN SKILLS					
BRIEFING	RATING P	WRITING	RATING A+	ANALYSIS	RATING P
OVER-ALL PERFORMANCE EVALUATION					RATING
<p>The RATING LETTER reflects the over-all performance of the student in the course and is thus a measure of the extent to which the student possesses the skills and techniques required in the production of finished intelligence. The rating is not necessarily arrived at by mathematically averaging in the skills ratings, but takes into consideration any outstanding strengths or weaknesses that should be reflected in an evaluation of the performance of the student as a whole. The RATING LETTER is a consensus of the view of the faculty.</p>					P-
REPORT OF OBSERVATIONS, JUDGMENTS AND IMPRESSIONS					
<p>This is a general, unspecific, narrative report of observations, judgments, and impressions. It includes intangible factors such as the student's attitude, cooperativeness, attentiveness, maturity, and judgment. It also includes the general impression the student has made on the faculty. This report will not be included unless the instructors believe that it would add something to the previous evaluation of performance in skills as well as to the evaluation of the OVER-ALL PERFORMANCE of the student.</p>					
FOR THE DIRECTOR OF TRAINING:		 CHIEF INTELLIGENCE PRODUCTION FACULTY INTELLIGENCE SCHOOL		DATE <input type="checkbox"/>	

S-E-C-R-E-T

PERFORMANCE RECORD

The Challenge of World-Wide Communism

CT Class 2000 - 1000000Course Description

A. Statement of Objectives

1. The student should recognize the challenge confronting the United States and the free world posed by the objectives, activities, and capabilities of World-Wide Communism.
2. The student should achieve a knowledge of the doctrine, organization and tactics of free-world Communist parties; and, similarly, of the capabilities, the policies, and the problems of the USSR and the People's Republic of China.

B. Course Method

1. Approximately one-half of the course is devoted to lectures, one-fourth to seminars, exercises and demonstrations, and one-fourth to individual study.
2. Student achievement is judged on the basis of performance in one written examination and participation in seminars and exercises.

NAME Flower, DavidWritten WorkExamination By StudentOral WorkSeminars, Exercises By StudentComments:

GROUP I
Excluded from automatic
downgrading and
declassification

S-E-C-R-E-T

TRAINING REPORT

OPERATIONS FAMILIARIZATION COURSE NO. 2-68
(192 hours, full-time)

2 Jan. - 26 Jan. 1968
(Date)

STUDENT : FLORES, Daniel

OFFICE : CTF

YEAR OF BIRTH: 1935

SERVICE DESIGNATION: SJ

GRADE : GS-07

NUMBER OF STUDENTS : 114 Begun

END DATE : March 1962

114 Finished

COURSE OBJECTIVE AND CONTENT

The Operations Familiarization Course is a four-week course designed to provide the student with an understanding of the Clandestine Services programs, operational methods and reporting techniques. Special emphasis is given the basic elements of tradecraft, the fundamentals of operational and intelligence information reporting, and the Foreign Intelligence, Counterintelligence and Covert Action programs of the Clandestine Services. General orientation is also provided in special operations and staff communications.

METHODS

The instructional methods used included class discussions, lectures, films, demonstrations, practical exercises and case studies. Practical exercises were conducted in operational and intelligence information reporting, surveillance, casing, handling of walk-in defectors and planning for, meeting and debriefing an agent. The operational programs of various Clandestine Services Divisions were discussed by representatives of the respective Headquarters components.

EVALUATION OF PERFORMANCE

The student's rating is based on understanding of the material presented as demonstrated by his participation in class discussions, the preparation of intelligence and operational reports, the application of operational principles in the practical exercises and the grade received on a comprehensive written examination given in the final week of the course which covered all areas of course content. Other factors considered in determining the final rating were the student's interest, attitude and preparation for assignments. The number of students receiving each adjectival rating on overall course performance is shown below. This student's rating is indicated by an asterisk. Explanatory narrative comments are included with a rating of ADEQUATE or STRONG. When considered pertinent by the training staff, comments may also be included with a PROFICIENT (average) rating.

<u>UNSATISFACTORY</u>	<u>ADEQUATE</u>	<u>* PROFICIENT</u>	<u>STRONG</u>
1	1	87	25

✓ Mr. Flores' overall performance in the course was at the solid proficient level. It should be noted that he demonstrated a particularly good attitude throughout the course. He took full advantage of the training offered to increase his knowledge of the Clandestine Services.

FOR THE DIRECTOR OF TRAINING

[Signature]
ACCOMPLISHED BY
J. S. C. S. S. S.

9 Feb. 1968
JTS

S-E-C-R-E-T

ORIENTATION TO INTELLIGENCE FOR CT'S
(Class of December 1967)

STUDENT	: Daniel FLORES	Duration:	11-22 December 1967 (30 hours, full time)
YEAR OF BIRTH:	1935	OFFICE	: CT
GRADE	: GS-07	SERVICE DESIGNATION:	SJ
EOD	: March 1962	NUMBER OF STUDENTS	: 88

COURSE OBJECTIVES - CONTENT AND METHODS

In the Orientation to Intelligence Course the objectives are: (1) to instruct the student in the basic concepts and terminology of intelligence; (2) to describe the history of U.S. intelligence and the current role of intelligence in the national security structure; (3) to outline the composition and mission of the intelligence community, noting the Agency's significant role therein; (4) to define the mission of CIA in supporting the DCI and to identify the functions of the Agency's major components, particularly in the collection, production, and dissemination of intelligence; and (5) to identify and discuss major problems facing the Agency. The area surveys and "Articulating the United States" elements of the course are designed to introduce the students briefly to some of the intelligence problems presented by major regions of the free world and to stimulate thought about the American way of life and its relationship to these areas.

Instructional techniques include lectures given by members of the Orientation and Briefing Faculty, guest speakers from Agency components, seminars, directed reading, review exercises, training films, and intelligence exhibits.

ACHIEVEMENT RECORD

The individual student evaluation is based on his score achieved on a written examination given at the conclusion of the course. This test, consisting of 100 items, covered all major aspects of the course content. The rating assigned to this student is:

PROFICIENT

The evaluation system used was as follows:

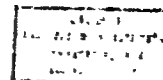
O = Outstanding	-	0-3 wrong
S = Strong	-	4-8 wrong
P = Proficient	-	9-15 wrong
A = Adequate	-	16-25 wrong
W = Weak	-	26- wrong

FOR THE DIRECTOR OF TRAINING:

Lawrence C. Baugh, Jr.
Chief, Orientation & Briefing Faculty

8 January 1968
Date

S-E-C-R-E-T



CONFIDENTIAL

26 October 1967

MEMORANDUM FOR: Daniel Flores

THROUGH : Executive Secretary
CSCT Selection Board

SUBJECT : Application for Career Training Program

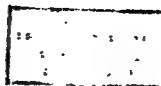
1. I am pleased to inform you that you have been accepted for the Career Training Program. Let me congratulate you and wish you the maximum profit and pleasure from your proposed training.

2. You will remain with your present Component until the beginning of the next Integrated Training Program, to begin 11 December. At that time you will be reassigned to the CTP T/O where you will remain until your training has been completed.

3. Should you have any further questions, do not hesitate to call on the Program Officers.


ROBERT B. FREEMAN
Chief, CTP

CONFIDENTIAL



SECRET

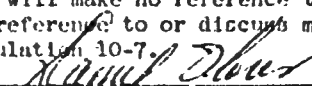

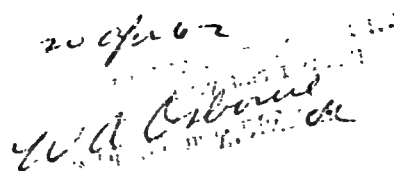
(When Filled In)

MILITARY STATUS QUESTIONNAIRE (READ INSTRUCTIONS ON REVERSE SIDE)				DO NOT WRITE IN SPACES BELOW	
1. THIS DATE (Month-day-year) MARCH 12, 1962				1-6. SERIAL NUMBER 006100	
2. NAME (Last-first-middle) FACKES, DANIEL (1)				7-24. NAME	
3. DATE OF BIRTH (Month-year) August 1935		4. SEX <input checked="" type="checkbox"/> (1) MALE <input type="checkbox"/> (2) FEMALE		25-28. UICR 1835	
5. OFFICE TO WHICH ASSIGNED EDF/OPSER/RT		6. SCHEDULE AND GRADE GS-04		29. SER 1	
7. SUBJECT TO CURRENT DRAFT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		8. INDICATE DRAFT CLASSIFICATION, IF ANY		30-31. OFFICE CODE 39	
				32-34. SCHD GS 04	
				35-36. CLASS.	
VETERANS COMPLETE THE FOLLOWING					
9. BRANCH OF SERVICE ON SEPARATION (Check one)			10. MIL. GRADE ON SEPARATION O-4 (E4)		40. BRANCH SERVICE 3
<input type="checkbox"/> (1) ARMY <input checked="" type="checkbox"/> (2) MARINE <input type="checkbox"/> (3) COAST GUARD <input type="checkbox"/> (4) NAVY <input type="checkbox"/> (5) AIR FORCE			10A. YRS. MOT OF ACTIVE SERVICE 4 YRS.		41-42. MIL. GRADE E 4
11. STATUS AT TIME OF SEPARATION (Check one)			43. STATUS AT SEPARATION 1		
<input checked="" type="checkbox"/> (1) REGULAR <input type="checkbox"/> (2) RESERVE <input type="checkbox"/> (3) DRAFTER <input type="checkbox"/> (4) OTHER (Specify in comments)					
12. TYPE OF SEPARATION (Check one)			44. TYPE OF SEPARATION (A-less than 8 yrs; B-8 yrs or more)		
PLEASE NOTE ALTHOUGH YOU MAY HAVE A SERVICE CONNECTED DISABILITY, DO NOT CHECK THE BOX "RETIRED-SERVICE CONNECTED DISABILITY" UNLESS YOU WERE ACTUALLY RETIRED FOR THIS REASON. IF OTHERWISE, CHECK "HONORABLE DISCHARGE" OR "RELEASED TO INACTIVE DUTY" AS APPROPRIATE, EVEN THOUGH YOU MAY BE DRAWING A DISABILITY ALLOWANCE OR COMPENSATION.			1A 2A 3A 7A 1B 3B 6B 7B 2A 4A 6A 8A 2B 4B 6B 8B		
<input type="checkbox"/> (1) RELEASED TO INACTIVE DUTY <input type="checkbox"/> (5) RETIRED-AGE <input checked="" type="checkbox"/> (2) HONORABLE DISCHARGE <input type="checkbox"/> (6) RETIRED-SERVICE CONNECTED DISABILITY <input type="checkbox"/> (3) RETIRED-20 (or more) YRS. SERVICE <input type="checkbox"/> (7) RETIRED-COMBAT DISABILITY <input type="checkbox"/> (4) RETIRED-LESS THAN 20 YRS. SERVICE <input type="checkbox"/> (8) OTHER-SPECIFY UNDER COMMENTS					
MEMBERS OF RESERVE FORCES COMPLETE THE FOLLOWING					
13. RESERVE BRANCH OR SERVICE		14. ORIGINAL ENTRY DATE IN ARMED SERVICES		45. BRANCH SERVICE	
15. SERVICE SERIAL NO.		16. MOS, AFSC, DESIGNATOR, OR RATING		46-49. ENTRY DATE	
17. MIL. GRADE		18. RESERVE CATEGORY (Check one)		50-59. SERV. SER. NO.	
		<input type="checkbox"/> (1) READY <input type="checkbox"/> (2) STANDBY <input type="checkbox"/> (3) RETIRED		60-64. MOS, AFSC, ETC.	
19. EXPIRATION DATE OF APPOINTMENT OR ENLISTMENT (Month and year)				55-59. MIL. GRADE	
				67. CATEGORY	
20. MIL. MOBILIZATION ASSIGNMENT				68-71. EXPIRATION DATE	
21. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED				72. MOBILIZATION ASSIGNMENT	
				73. ASSIGNMENT UNIT	
				74. MOBILIZATION CATEGORY	
22. COMMENTS					

CIA INTERNAL USE ONLY
(Classify When Filled In)

OUTSIDE ACTIVITY APPROVAL REQUEST

SEE HR 10-7 BEFORE SUBMITTING TO FOR AN ORIGINAL AND 2 COPIES OF THIS FORM

TO :	DIRECTOR OF SECURITY; ATTN: EMPLOYEE ACTIVITY BRANCH			DATE	16 April 1962
THROUGH:	(Operating official, administrative and/or security officer)				
JOHN A. MAYO, Jr. Security Officer, RID					
FROM :	NAME AND GRADE OF EMPLOYEE (Print or type)	COMPONENT	ROOM NO. AND BLDG.	PHONE	
	FLORES, Daniel GS-04	DDP/OPSER/RID/RB/IN	A B 4003	6187	
1. DESCRIPTION OF OUTSIDE ACTIVITY FOR WHICH APPROVAL IS REQUESTED:					
Bartender					
2. FULL NAMES OF ORGANIZATION AND/OR PERSONS INVOLVED					
Bartenders Union Local 014 75 Mr. Patrick Duffy					
3. DATE(S) OF PARTICIPATION AND LOCALE OF ACTIVITY					
On call different days of the week. 914 F Street, N. W. Washington, D. C.					
4. REMARKS					
In engaging in the requested activity I will make no reference to, or discuss my CIA assignments or duties nor will I make reference to or discuss my CIA employment except as authorized by Headquarters Regulation 10-7.					
 SIGNATURE OF REQUESTING EMPLOYEE					
5. CONCURRENCES AND/OR APPROVAL WITHIN OPERATING OFFICE					
(signed) John M. Wiggleworth JOHN M. WIGGLEWORTH Chief, RID/ADMIN					
FOR COMPLETION BY EMPLOYEE ACTIVITY BRANCH AND RETURN OF ORIGINAL TO EMPLOYEE					
 					


Standard Form No. 1000 CHAPTER I-1 PM G. 6-60-1000		HEALTH BENEFITS REGISTRATION FORM <small>FEDERAL EMPLOYEES HEALTH BENEFITS ACT OF 1959</small>			4536490																		
PART A ALL WHO REGISTER MUST FILL IN THIS PART	1. NAME (LAST, FIRST, MIDDLE) FLORNO, D. J.	2. DATE OF BIRTH MONTH DAY YEAR 7 1 35	3. Are you now married? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>																				
	4. YOUR MARITAL ADDRESS (INDICATE ALSO STREET, CITY AND ZONE NUMBER, STATE) 1187 1/2 N. 1st St. N.W.	5. Place an "X" in proper box to show your annual basic salary range: UNDER \$4,000 <input type="checkbox"/> \$4,000 - \$5,999 <input checked="" type="checkbox"/> \$6,000 - \$7,999 <input type="checkbox"/> \$8,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$11,999 <input type="checkbox"/> \$12,000 - \$13,999 <input type="checkbox"/> \$14,000 - \$15,999 <input type="checkbox"/> \$16,000 - \$17,999 <input type="checkbox"/> \$18,000 - \$19,999 <input type="checkbox"/> \$20,000 - \$21,999 <input type="checkbox"/> \$22,000 - \$23,999 <input type="checkbox"/> \$24,000 - \$25,999 <input type="checkbox"/> \$26,000 - \$27,999 <input type="checkbox"/> \$28,000 - \$29,999 <input type="checkbox"/> \$30,000 - \$31,999 <input type="checkbox"/> \$32,000 - \$33,999 <input type="checkbox"/> \$34,000 - \$35,999 <input type="checkbox"/> \$36,000 - \$37,999 <input type="checkbox"/> \$38,000 - \$39,999 <input type="checkbox"/> \$40,000 - \$41,999 <input type="checkbox"/> \$42,000 - \$43,999 <input type="checkbox"/> \$44,000 - \$45,999 <input type="checkbox"/> \$46,000 - \$47,999 <input type="checkbox"/> \$48,000 - \$49,999 <input type="checkbox"/> \$50,000 - \$51,999 <input type="checkbox"/> \$52,000 - \$53,999 <input type="checkbox"/> \$54,000 - \$55,999 <input type="checkbox"/> \$56,000 - \$57,999 <input type="checkbox"/> \$58,000 - \$59,999 <input type="checkbox"/> \$60,000 - \$61,999 <input type="checkbox"/> \$62,000 - \$63,999 <input type="checkbox"/> \$64,000 - \$65,999 <input type="checkbox"/> \$66,000 - \$67,999 <input type="checkbox"/> \$68,000 - \$69,999 <input type="checkbox"/> \$70,000 - \$71,999 <input type="checkbox"/> \$72,000 - \$73,999 <input type="checkbox"/> \$74,000 - \$75,999 <input type="checkbox"/> \$76,000 - \$77,999 <input type="checkbox"/> \$78,000 - \$79,999 <input type="checkbox"/> \$80,000 - \$81,999 <input type="checkbox"/> \$82,000 - \$83,999 <input type="checkbox"/> \$84,000 - \$85,999 <input type="checkbox"/> \$86,000 - \$87,999 <input type="checkbox"/> \$88,000 - \$89,999 <input type="checkbox"/> \$90,000 - \$91,999 <input type="checkbox"/> \$92,000 - \$93,999 <input type="checkbox"/> \$94,000 - \$95,999 <input type="checkbox"/> \$96,000 - \$97,999 <input type="checkbox"/> \$98,000 - \$99,999 <input type="checkbox"/> \$100,000 and over <input type="checkbox"/>	6. Are you covered by, or is any law firm, company, fund, or other organization, or anything in a plan under the Federal Employees Health Benefits Act of 1959 (through the enactment of any other United States or District of Columbia Government Employees Act amendment)? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>																				
PART B FILL IN THIS PART IF YOU WISH TO EN- ROLL IN A HEALTH BENEFITS PLAN	7. I elect to enroll in a health benefit plan as shown below. I authorize deductions to be made from my salary, compensation, or annuity to cover my share of the cost of the enrollment. (Copy the information received below from inside cover of brochure of the plan you select.)																						
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 40%;">NAME OF PLAN</th> <th style="width: 20%;">OPTIONAL HEALTH OPTION</th> <th style="width: 40%;">THE CODE NUMBER</th> </tr> <tr> <td>Health Insurance Plan</td> <td>HIGH</td> <td>1 1 2</td> </tr> </table>					NAME OF PLAN	OPTIONAL HEALTH OPTION	THE CODE NUMBER	Health Insurance Plan	HIGH	1 1 2												
NAME OF PLAN	OPTIONAL HEALTH OPTION	THE CODE NUMBER																					
Health Insurance Plan	HIGH	1 1 2																					
<p>8. In space below list all eligible family members except dependent children who are over 19 and who, because of the disability, is incapable of self-support. (Attach a doctor's certificate for a disabled child age 19 or over.)</p> <p>9. If enrollment is for self only, answer item 9. If enrollment is for self and family also, answer item 9 in item 3 if it applies.</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">NAME OF FAMILY MEMBER</th> <th style="width: 20%;">DATE OF BIRTH (Month, Day, Year)</th> <th style="width: 50%;">DATE OF BIRTH (Month, Day, Year)</th> </tr> </thead> <tbody> <tr> <td>Wife or Husband John D. Florno</td> <td>11/4/35</td> <td>1</td> </tr> <tr> <td></td> <td></td> <td>2</td> </tr> <tr> <td></td> <td></td> <td>3</td> </tr> <tr> <td></td> <td></td> <td>4</td> </tr> <tr> <td></td> <td></td> <td>5</td> </tr> </tbody> </table>					NAME OF FAMILY MEMBER	DATE OF BIRTH (Month, Day, Year)	DATE OF BIRTH (Month, Day, Year)	Wife or Husband John D. Florno	11/4/35	1			2			3			4			5
	NAME OF FAMILY MEMBER	DATE OF BIRTH (Month, Day, Year)	DATE OF BIRTH (Month, Day, Year)																				
Wife or Husband John D. Florno	11/4/35	1																					
		2																					
		3																					
		4																					
		5																					
<p>10. If a female (employee or annuitant), does the family listed above include a husband who is incapable of self-support because of mental or physical disability which can be expected to continue for more than one year? (If answer "YES," attach a doctor's certificate.)</p> <p>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p>																							
PART C FILL IN THIS PART IF YOU WISH TO CHANGE YOUR ENROLLMENT	11. I elect to enroll in any plan under the Health Benefits Act. <input type="checkbox"/>																						
	<p>12. I elect to cancel my present enrollment under the Health Benefits Act. <input type="checkbox"/></p> <p>13. Any other reason: <input type="checkbox"/></p>																						
PART D FILL IN THIS PART IF YOU WISH TO CHANGE YOUR ENROLLMENT	14. I elect to change my enrollment as shown by the enrollment number and other information in Part B.																						
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 30%;">Enrollment code number of present plan</th> <th style="width: 20%;">Date of event which permits change (See table on back of brochure for proper codes)</th> <th style="width: 50%;">Date of event which permits change (Month, Day, Year)</th> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>					Enrollment code number of present plan	Date of event which permits change (See table on back of brochure for proper codes)	Date of event which permits change (Month, Day, Year)															
Enrollment code number of present plan	Date of event which permits change (See table on back of brochure for proper codes)	Date of event which permits change (Month, Day, Year)																					
PART E ALL WHO REGISTER MUST FILL IN THIS PART	<p>15. Signature of employee or annuitant: Samuel Louis 2nd</p> <p>16. Signature of employer or agency: John D. Florno</p>																						
	<p>17. Signature of authorized official: John D. Florno</p>																						
PART F TO BE COMPLETED BY AGENCY	<p>18. Name and address of employing office: 1187 1/2 N. 1st St. N.W.</p>																						
	<p>19. Date received at employing office: 11/16/55</p> <p>20. Effective date of election: 11/16/55</p> <p>21. Payment action (initials and date):</p>																						
<p>22. REMARKS (Use only for amendments and agency):</p>																							

CONFIDENTIAL,
(when filled in)

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents
of Handbook 20-4, Employee Conduct, dated 29 August 1961.


Signature


Date

CONFIDENTIAL

APPOINTMENT AFFIDAVITS

IMPORTANT: Before swearing to these appointment affidavits, you should read and understand the attached information for appointee

CENTRAL INTELLIGENCE AGENCY WASHINGTON, D. C.
(Department or agency) (Bureau or division) (Place of employment)

I, FLORES, DANIEL, do solemnly swear (or affirm) that—

A. OATH OF OFFICE

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely without any mental reservation or purpose of evasion; that I will well and faithfully discharge the duties of the office on which I am about to enter, SO HELP ME GOD.

B. AFFIDAVIT AS TO SUBVERSIVE ACTIVITY AND AFFILIATION

I am not a Communist or Fascist. I do not advocate nor am I knowingly a member of any organization that advocates the overthrow of the constitutional form of the Government of the United States, or which seeks by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) that I will not so advocate, nor will I knowingly become a member of such organization during the period that I am an employee of the Federal Government or any agency thereof.

C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not participating in any strike against the Government of the United States or any agency thereof, and I will not so participate while an employee of the Government of the United States or any agency thereof. I do not and will not assert the right to strike against the Government of the United States or any agency thereof while an employee of the Government of the United States or any agency thereof. I do further swear (or affirm) that I am not knowingly a member of an organization of Government employees that asserts the right to strike against the Government of the United States or any agency thereof and I will not, while an employee of the Government of the United States or any agency thereof, knowingly become a member of such an organization.

D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not, nor has anyone acting in my behalf, given, transferred, promised or paid any consideration for or in expectation or hope of receiving assistance in securing such appointment.

E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers given in the Declaration of Appointee on the reverse of this form are true and correct.

11 March 1962
(Date of entrance on duty)

Daniel Flores
(Signature of appointee)

Subscribed and sworn before me this 12th day of March, A. D. 1962,
at Washington, D. C.
(City) (State)

[SEAL]

Charles L. Lewis
(Signature of official)
Appointment Clerk
(Title)

NOTE—The oath of office must be administered by a person specified in 5 U. S. C. 18 or by a person designated to administer oaths under Section 506, Act of June 10, 1943, 5 U. S. C. 10a. If the latter, the date of expiration of his commission should be shown.

DECLARATION OF APPOINTEE

This form is to be completed before entrance on duty. Answer all questions. Admitted unfavorable information about such matters as arrests or discharges will be considered together with the favorable information in your record in determining your present fitness for Federal employment. However, a false statement or dishonest answer to any question may be grounds for dismissal after appointment and is punishable by law.

1. PRESENT ADDRESS (street and number, city and State)
 5528 CONNECTICUT AVE. N.W. #203. WASHINGTON 8, D.C.

2. (A) DATE OF BIRTH
 August 4, 1905

(B) PLACE OF BIRTH (city and State or city and foreign country)
 SAN MARCOS, TEXAS

3. (A) IN CASE OF EMERGENCY, PLEASE NOTIFY
 MRS. DORRIS L. LEE

(B) RELATIONSHIP
 WIFE

(C) STREET AND NUMBER, CITY AND STATE
 2925 CONNECTICUT AVE. N.W. WASH. 8, D.C.

(D) TELEPHONE NO.
 263-8322

4. DOES THE UNITED STATES GOVERNMENT EMPLOY, IN A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (EITHER BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS? ☐ YES ☐ NO

If so, for each such relative fill in the blank below. If additional space is necessary, complete under Item 12.

NAME	LAST OFFICE ADDRESS (Give street number, if any)	(1) POSITION (2) TEMPORARY OR NOT (3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	RELATIONSHIP	MARRIED (Check one)	SINGLE
		1.			
		2.			
		3.			
		4.			
		5.			
		6.			
		7.			

INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO	INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO
8. (A) ARE YOU A CITIZEN OF THE UNITED STATES OF AMERICA OR (B) AS A NATIVE OF AMERICAN SAMOA DO YOU OWE ALLEGIANCE TO THE UNITED STATES OF AMERICA?	X		10. (A) HAVE YOU EVER FILED A WAIVER OF LIFE INSURANCE COVERAGE UNDER THE FEDERAL EMPLOYEES' GROUP LIFE INSURANCE ACT?		X
9. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? If your answer is "Yes," give details in Item 12.		X	(B) IF YOU HAVE FILED SUCH A WAIVER, HAS IT BEEN CANCELED OR RELOADED?		X
11. (A) HAVE YOU RECEIVED OR HAVE YOU APPLIED FOR AN ANNUITY FROM THE UNITED STATES DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PERSON OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? If your answer is "Yes," give details in Item 12.		X	11. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, A. HAVE YOU BEEN DISCHARGED FROM EMPLOYMENT BECAUSE: (1) YOUR CONDUCT WAS NOT SATISFACTORY? (2) YOUR WORK WAS NOT SATISFACTORY?		X
12. (A) SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, HAVE YOU BEEN BARRED BY THE U.S. CIVIL SERVICE COMMISSION FROM TAKING EXAMINATIONS OR ACCEPTING THIS APPOINTMENT? If your answer is "Yes," give details in Item 12.		X	B. HAVE YOU RESIGNED AFTER OFFICIAL NOTIFICATION THAT: (1) YOUR CONDUCT WAS NOT SATISFACTORY? (2) YOUR WORK WAS NOT SATISFACTORY?		X
13. (A) SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, HAVE YOU BEEN BARRED BY THE U.S. CIVIL SERVICE COMMISSION FROM TAKING EXAMINATIONS OR ACCEPTING THIS APPOINTMENT? If your answer is "Yes," give details in Item 12.		X	C. HAVE YOU BEEN DISCHARGED FROM THE ARMED SERVICES UNDER OTHER THAN HONORABLE CIRCUMSTANCES? If your answer to A, B or C is "Yes," give details in Item 12, including as far as possible including the name and address of employer, approximate date, and reasons in each case.		X

14. SPACE FOR (A) ADDITIONAL ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)

ITEM NO. 15. DATE OF BIRTH (month, day, year) 16. DATE OF BIRTH (month, day, year) 17. DATE OF BIRTH (month, day, year) 18. DATE OF BIRTH (month, day, year) 19. DATE OF BIRTH (month, day, year)	ITEM NO. 20. DATE OF BIRTH (month, day, year) 21. DATE OF BIRTH (month, day, year) 22. DATE OF BIRTH (month, day, year) 23. DATE OF BIRTH (month, day, year) 24. DATE OF BIRTH (month, day, year)
---	---

INSTRUCTIONS TO APPOINTING OFFICER: You must determine that the appointment award has been forwarded with the Civil Service Act, Executive Order, Bureau Order and Regulations, and only if the above information is correct. This form should be attached to the award of office, and any record of record of discharge or arrest, etc., if necessary, and must be of the same. Also, to establish the identity of the appointee, you should obtain from the appointee (1) his signature and handwriting against the application and on other pertinent papers and (2) his photograph against the medical certificate.

STATEMENT OF PRIOR FEDERAL CIVILIAN AND MILITARY SERVICE AND DETERMINATION OF COMPETITIVE STATUS

IMPORTANT: The information on this form will be used (1) in determining creditable service for leave purposes and retention credits for reduction in force, and (2) in recording agency determination of competitive status. The employee should complete Part I and the Personnel Office should complete Parts II through V.

PART I.—EMPLOYEE'S STATEMENT

PART II.—THIS COLUMN IS FOR PERSONNEL OFFICE USE

1. NAME (Last, first, middle initial)

2. DATE OF BIRTH

FLORES, DANIEL

August 4, 1935

3. LIST THE FOLLOWING INFORMATION CONCERNING ALL FEDERAL AND DISTRICT OF COLUMBIA SERVICE YOU HAVE HAD PRIOR TO YOUR PRESENT APPOINTMENT (Do not include military service.)

9. RETENTION GROUP

10. A. C'S STATUS ☐ YES ☐ NO
B. TYPE OF PRESENT APPOINTMENT

NAME AND LOCATION OF AGENCY	FROM—			TO—			TYPE OF APPOINTMENT IF KNOWN
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	

11. SERVICE

YEAR	MONTH	DAY

4. LIST PERIODS OF ACTIVE SERVICE IN ANY BRANCH OF THE ARMED FORCES OF THE UNITED STATES. IF YOU HAD NO ACTIVE MILITARY SERVICE, WRITE "NONE"

BRANCH	FROM—			TO—			DISCHARGE (Hon or dishon?)
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	
UNITED STATES MARINE CORPS	1959	JULY	25	1961	JULY	25	HONORABLE

5. DURING PERIODS OF EMPLOYMENT SHOWN IN ITEM 3, DID YOU HAVE A TOTAL OF MORE THAN 6 MONTHS ABSENCE WITHOUT PAY, INCLUDING PERIODS OF MERCHANT MARINE SERVICE, DURING ANY ONE CALENDAR YEAR? ☐ YES ☐ NO
IF ANSWER IS "YES," LIST FOLLOWING INFORMATION.

TYPE IF KNOWN (LWOP, Full, Susp, AWOL, Mes Mar)	FROM—			TO—			TOTAL		
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEARS	MONTHS	DAYS

6. DURING THE FEDERAL SERVICE LISTED IN ITEM 3, DID YOU ACQUIRE A PERMANENT COMPETITIVE CIVIL SERVICE STATUS?

☐ YES ☐ NO

(If answer is "Yes," in what agency were you employed at the time status was acquired?)

7. ARE YOU

A. THE WIFE OF A DISABLED VETERAN? ☐ YES ☐ NO

B. THE MOTHER OF A DECEASED OR DISABLED VETERAN? ☐ YES ☐ NO

C. THE UNREMARKED SPOUSE OF A VETERAN? ☐ YES ☐ NO

8. TO BE EXECUTED BEFORE A NOTARY PUBLIC OR OTHER PERSONS AUTHORIZED TO ADMINISTER OATHS.

I swear (or affirm) that the above statements are true to the best of my knowledge and belief.

12 March 1962
(DATE)

Daniel Flores
(SIGNATURE)

Subscribed and sworn to before me on this 12th day of Mar 1962 at Washington, D. C.
(LOCATION) (DATE) (STATE)

SEAL

Shirley L. Smith
(SIGNATURE)

NOTE: If oath is taken before a Notary Public, the date of expiration of his Commission should be shown.

INSTRUCTIONS: Fill this form on the personnel side of the employee's official personnel folder immediately before or after the personnel action involved.

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(When Filled In)

Complete in duplicate. The data recorded on this form is essential in determining travel expenses allowable in connection with leave at government expense, overseas duty, return to residence upon separation, and for providing current residence and dependency information required in the event of an employee emergency. The original of this form will be filed in the employee's official personnel folder.

NAME OF EMPLOYEE (Last)		(First)	(Middle)	SOCIAL SECURITY NUMBER
FLORES		DANIEL	CR	1162-25-6250
1. RESIDENCE DATA				
PLACE OF RESIDENCE WHEN INITIALLY APPOINTED		LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad)		
2828 CONNORS AVE. WASH. 8, DC				
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE		HOME LEAVE RESIDENCE		
2828 CONNORS AVE. WASH. 8, DC				
2. MARITAL STATUS (Check one)				
<input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOWED <input type="checkbox"/> ANNULLED				
IF MARRIED, PLACE OF MARRIAGE				DATE OF MARRIAGE
LIMA, PERU, SOUTH AMERICA				11/14/1961
IF DIVORCED, PLACE OF DIVORCE DECREE				DATE OF DECREE
IF WIDOWED, PLACE SPOUSE DIED				DATE SPOUSE DIED
IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S)				
3. MEMBERS OF FAMILY				
NAME OF SPOUSE		ADDRESS (No., Street, City, Zone, State)		TELEPHONE NO.
HONORARY A. FLORES		2828 CONNORS AVE. N.W.		265-8322
NAMES OF CHILDREN		ADDRESS		SEX DATE OF BIRTH
NAME OF FATHER (Or male guardian)		ADDRESS		TELEPHONE NO.
JOSE J. FLORES		501 S. QUINN AVE. S.W. WASH. 8, DC		
NAME OF MOTHER (Or female guardian)		ADDRESS		TELEPHONE NO.
ANTHONY R. FLORES		501 S. QUINN AVE. S.W. WASH. 8, DC		
WHAT MEMBER(S) OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY?				
4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY				
NAME (Mr., Mrs., Miss) (Last-First-Middle)		RELATIONSHIP		
FLORES, DANIEL ARNET		WIFE		
HOME ADDRESS (No., Street, City, Zone, State)		HOME TELEPHONE NUMBER		
2828 CONNORS AVE. N.W. WASH. 8, D.C.		265-5322		
BUSINESS ADDRESS (No., Street, City, Zone, State) AND NAME OF EMPLOYER, IF APPLICABLE		BUSINESS TELEPHONE & EXTENSION		
1000 16TH ST. N.W. WASHINGTON 6, DC		RF 7-5444		
IS THE INDIVIDUAL NAMED ABOVE SITTING OF YOUR AGENCY AFFILIATION? (If "No" give name and address of organization he believes you work for.)				YES NO
				YES NO
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF? (If "No" give name and address of person, if any, who can make such decisions in case of emergency.)				YES NO
				YES NO
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer is "No" explain why in item 5.)				YES NO
				YES NO
The persons named in item 3 above may also be notified in case of emergency. If such notification is not desirable because of health or other reasons, please so state in item 6 on the reverse side of this form.				
CONTINUE ON REVERSE SIDE				
CURRENT RESIDENCE AND DEPENDENCY REPORT				

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(When Filled In)

5.

VOLUNTARY ENTRIES

Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.

INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.

UNION TRUST CO., WASH., D.C. - DANIEL OR VIRGINIA A. FLECK'S
BANK OF CALIFORNIA, PORTLAND ORE, DANIEL OR VIRGINIA A. FLECK'S

HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? ☐ YES ☒ NO. (If "Yes" where is document located?)

HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS?
☐ YES ☐ NO. (If "Yes" give name(s) and address)

HAVE YOU EXECUTED A POWER OF ATTORNEY? ☐ YES ☒ NO. (If "Yes", who possess the power of attorney?)

6.

ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

SIGNED AT

Washington DC

DATE

March 12, 1962

SIGNATURE

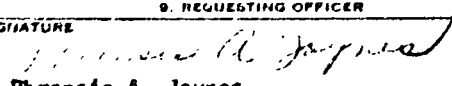
Daniel A. Fleck

CONFIDENTIAL

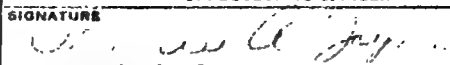
☐ UNCLASSIFIED

REQUEST FOR MEDICAL EVALUATION		12 Sept 77		APPLICANT HAS APPLICANT PREVIOUSLY BEEN SEEN BY OMS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO DEPENDENT <input type="checkbox"/> EMPLOYEE <input type="checkbox"/>	
NAME (Last, First, Middle) Flores, Daniel		4 AUGUST 1977		4 Aug 35	
GRADE 13		ALL		EDO/LA 5270 Ods Officer	
COMPLETE TO REQUESTING OFFICE DEPENDENT TO COMPANY OR RELATIVE WITHIN 100 MILES OF DISCHARGE (DEPENDENT'S) 13 DEPENDENT NAME (Last, First, Middle) 14 SOC SEC NO. 15 BIRTH DATE (MM/DD/YY) 16 SEX 17 RELATIONSHIP 18 DEPENDENT PREVIOUSLY SEEN BY OMS (yes/no)					
Flores, Dorothy		31 Jan 35		F wife yes	
Flores, Xola M.		15 Mar 74		F dau yes	
20 REQUESTED ACTION (more than one action is acceptable)					
APPLICANT		TIME EMPLOYMENT		EOD	
ASSIGNMENTS		USPCS		STATION Mexico City	
		USDOV		TYPE COVER Nominal State	
		US RETURNEE		FITNESS FOR DUTY	
		US TOY STANDBY		RETURN TO DUTY	
SEPARATION		RETIREMENT		SPECIAL TRAINING	
ROUTINE		REGULAR ANNUAL		MDR/CSC	
ROUTINE		EXECUTIVE ANNUAL		MPT/PHE	
21 COMMENTS					
Assignment to Tokyo, Japan has been cancelled, Subject is now being considered for Mexico City.					
22 REQUESTING OFFICER'S OFFICE DIV		23 ROOM/BLDG		24 EXTENSION	
DIO/LA/PERS		3D3B3 JAG		5270	
25 SIGNATURE OF REQUESTING OFFICER		Dianne M. Hoy			
FOR APPLICANTS		FOR OMS USE ONLY			
APPROVE PROCESSING FOR EOD		DATE			
HOLD PENDING RECEIPT OF ADDITIONAL MEDICAL INFORMATION (Form 1000 attached)		OMS SIGNATURE			
REQUEST PRE EMP MEDICAL EVALUATION		DATE			
OTHER (see instructions)		OMS SIGNATURE			
FOR OTHER ACTIONS		COMMENTS			
REQUESTED ACTION	QUAL	COND QUAL	DEFER	DISQUAL	QUALIFIED FOR OMS OCS MUST BE EVALUATED PRIOR TO FUTURE OCS.
DATE		DATE			
DATE		DATE			

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST 28 July 1976	
2. NAME (Last, First, Middle) Flores, Daniel		3. POSITION TITLE Instructor	
DOB: 4 August 1935		4. GRADE GS-12	
5. OFFICE DIVISION BRANCH OTR/FTD/OTB		6. EMPLOYEE'S EXT. 5191	
7. PURPOSE OF EVALUATION			
<input type="checkbox"/> PRE-EMPLOYMENT <input type="checkbox"/> ENTRANCE ON DUTY <input checked="" type="checkbox"/> TDY STANDBY <input type="checkbox"/> SPECIAL TRAINING <input type="checkbox"/> ANNUAL <input type="checkbox"/> RETURN TO DUTY <input type="checkbox"/> FITNESS FOR DUTY <input type="checkbox"/> MEDICAL RETIREMENT	<input type="checkbox"/> HQGS/TDY <input type="checkbox"/> OVERSEAS ASSIGNMENT <div style="border: 1px solid black; padding: 2px; margin-bottom: 10px;"> ETD STATION TDY OR PCS TYPE OF COVER NO. OF DEPENDENTS TO ACCOMPANY NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED </div> <input type="checkbox"/> RETURN FROM OVERSEAS <div style="border: 1px solid black; padding: 2px;"> ETA STATION NO. OF DEP.'S </div>		
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER	
<input type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE  Phronie A. Joyner ROOM NO. & BUILDING 6067 Hqs	
		EXT. 5191	
10. COMMENTS Destination: World-Wide			
11. REPORT OF EVALUATION Qualified for TDY Standby until 1 August 1978.			
DATE 31 August 1976		SIGNATURE FOR CHIEF OF MEDICAL STAFF William T. Golder, ONS/PEO	

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST	
		18 June 1976	
2. NAME (Last, First, Middle) Flores, Daniel		3. POSITION TITLE Instructor	4. GRADE GS-13
5. OFFICE DIVISION BRANCH OTR/FTD/OTB		6. EMPLOYEE'S EAT. 5191	
7. PURPOSE OF EVALUATION			
<input type="checkbox"/> PRE-EMPLOYMENT <input type="checkbox"/> ENTRANCE ON DUTY <input checked="" type="checkbox"/> TDY STANDBY <input type="checkbox"/> SPECIAL TRAINING <input type="checkbox"/> ANNUAL <input type="checkbox"/> RETURN TO DUTY <input type="checkbox"/> FITNESS FOR DUTY <input type="checkbox"/> MEDICAL RETIREMENT	<input type="checkbox"/> HQS/TDY <input type="checkbox"/> OVERSEAS ASSIGNMENT <div style="border: 1px solid black; padding: 2px;"> ETD STATION TDY OR PCS TYPE OF COVER NO. OF DEPENDENTS TO ACCOMPANY NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED </div> <input type="checkbox"/> RETURN FROM OVERSEAS <div style="border: 1px solid black; padding: 2px;"> ETA STATION NO. OF DEP.'S </div>		
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER	
<input type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE  Phronie A. Joynes ROOM NO. & BUILDING GD57 Bldg.	
		EXT. 5191	
10. COMMENTS			
11. REPORT OF EVALUATION			
Qualified for TDY Standby until 1 August 1978.			
DATE 31 August 1976		SIGNATURE FOR CHIEF OF MEDICAL STAFF William T. Golder, OMS/PEO	

FORM 259 USE PREVIOUS EDITIONS
1-72

SECRET

E 2 IMPDET CL BY 007622 (26)

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST	
2. NAME (Last, First, Middle) Flores, Daniel (NMN) 4-35		10 Mar 75	
3. POSITION TITLE Ops Officer		4. GRADE GS-12	
5. OFFICE DIVISION BRANCH DDO/LA/COG		6. EMPLOYEE'S EXT. 7265	
7. PURPOSE OF EVALUATION			
<input type="checkbox"/> PRE-EMPLOYMENT <input type="checkbox"/> ENTRANCE ON DUTY <input checked="" type="checkbox"/> TDY STANDBY <input type="checkbox"/> SPECIAL TRAINING <input type="checkbox"/> ANNUAL <input type="checkbox"/> RETURN TO DUTY <input type="checkbox"/> FITNESS FOR DUTY <input type="checkbox"/> MEDICAL RETIREMENT	<input type="checkbox"/> HDQS/TDY <input type="checkbox"/> OVERSEAS ASSIGNMENT <div style="border: 1px solid black; padding: 2px;"> ETD STATION TDY OR PCS TYPE OF COVER NO. OF DEPENDENTS TO ACCOMPANY NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED </div> <input type="checkbox"/> RETURN FROM OVERSEAS <div style="border: 1px solid black; padding: 2px;"> ETA STATION NO. OF DEP.'S </div>		
8. OVERSEAS PLANNING EVALUATIONS (One block must be checked)		9. REQUESTING OFFICER	
<input type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE <div style="text-align: center;"><i>Kathy Hill</i> Kathy Hill, LA/Trng</div> <div style="display: flex; justify-content: space-between;"> <div>ROOM NO. & BUILDING 3D5317 Hqs</div> <div>EXT. 7431</div> </div>	
10. COMMENTS			
11. REPORT OF EVALUATION			
Disposition deferred until subject fulfills medical requirements.			
DATE 1 April 1975		SIGNATURE FOR CHIEF OF MEDICAL STAFF William T. Golder, OAS/Registrar	

FORM 259 USE PREVIOUS EDITIONS

SECRET

4/1/75

(20)

SECRET

1. NAME (Last, First, Middle) Flores, Daniel		2. DATE OF BIRTH 4 Aug 1935	3. GRADE GS-10
4. OFFICE, DIVISION, BRANCH (or overseas station and existing cover if lateral assignment) DDP/WII/Guayaquil (Stato)		5. PRESENT POSITION 0376	6. EMPLOYEE EXTENSION 7431
7. PROPOSED STATION Lima, Peru		8. PROPOSED POSITION (Title, Number, Grade) Ops Officer/0636/GS-13	
9. TYPE OF COVER AT NEW STATION State		10. ESTIMATED DATE OF DEPARTURE Sept 71	11. NO. OF DEPENDENTS TO ACCOMPANY two
12. COMMENTS <p>Vice: Donald J. Venuto Please schedule appointments week of 31 May 1971/</p> <p>Mr. Flores' Spanish capabilities are native reading and high speaking which more than meets the language requirements of intermediate reading and speaking for the Station.</p> <p><i>Gregory W. Smith</i> 13 May 71</p>			
13. DATE OF REQUEST 11 Mar 71	14. SIGNATURE OF REQUESTING OFFICIAL <i>Joan Wright</i> Joan Wright	15. ROOM NUMBER AND BUILDING 3D 5309 Hqs	16. EXTENSION 7431
17. OFFICE OF MEDICAL SERVICES DISPOSITION			
18. OFFICE OF SECURITY DISPOSITION			
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION <p style="text-align: right;">15 JUN 1971</p> <p>QUALIFIED FOR PROPOSED ASSIGNMENT OVERSEAS</p> <p><i>G. E. Lott</i> Chairman, Overseas Candidate Review Panel</p>			
REQUEST FOR PCS OVERSEAS EVALUATION			

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST 11 Mar 71	
2. NAME (Last, First, Middle) Flores, Daniel (Dependents of)		3. POSITION TITLE Ops Officer	
5. OFFICE DIVISION, BRANCH DDP/WH/Quayaquil		4. GRADE GS-10	
		6. EMPLOYEE'S EAT. 7431	
7. PURPOSE OF EVALUATION			
<input type="checkbox"/> PRE-EMPLOYMENT <input type="checkbox"/> ENTRANCE ON DUTY <input type="checkbox"/> TDY STANDBY <input type="checkbox"/> SPECIAL TRAINING <input type="checkbox"/> ANNUAL <input type="checkbox"/> RETURN TO DUTY <input type="checkbox"/> FITNESS FOR DUTY <input type="checkbox"/> MEDICAL RETIREMENT		<input type="checkbox"/> HDQS/TDY <input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT <div style="border: 1px solid black; padding: 5px;"> ETO September 1971 STATION Lima, Peru TDY OR PCS PCS TYPE OF COVER State NO. OF DEPENDENTS TO ACCOMPANY Two NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED </div> <input type="checkbox"/> RETURN FROM OVERSEAS <div style="border: 1px solid black; padding: 5px;"> ETA STATION NO. OF DEP.'S </div>	
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE Joan Wright ROOM NO. & BUILDING 3D 5300 Eqs	
		EAT. 7431	

Dorothy wife 31 Jan 1938
Kendra dau 3 Mar 1971

Please schedule appointments week of 31 May 1971.

REPORT OF EVALUATION QUINCY LEE JUN 22 PCO 16 07R

BERRY PRESTON

DATE _____ SCHEDULED FOR STAFF OF MEDICAL STAFF

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST 11 Mar 71																		
2. NAME (Last, First, Middle) Flores, Daniel (Dependents of)		3. POSITION/TITLE Ops Officer	4. GRADE OS-10																	
5. OFFICE DIVISION BRANCH DDP/WH/Guayaquil		6. EMPLOYEE'S EXT. 7431																		
7. PURPOSE OF EVALUATION																				
<input type="checkbox"/> PRE-EMPLOYMENT <input type="checkbox"/> ENTRANCE ON DUTY <input type="checkbox"/> TDY STANDBY <input type="checkbox"/> SPECIAL TRAINING <input type="checkbox"/> ANNUAL <input type="checkbox"/> RETURN TO DUTY <input type="checkbox"/> FITNESS FOR DUTY <input type="checkbox"/> MEDICAL RETIREMENT		<input type="checkbox"/> HQS/TDY <input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>ETD</td></tr> <tr><td>September 1971</td></tr> <tr><td>STATION</td></tr> <tr><td>Lima, Peru</td></tr> <tr><td>TDY OR PCS</td></tr> <tr><td>PCS</td></tr> <tr><td>TYPE OF COVER</td></tr> <tr><td>State</td></tr> <tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td></tr> <tr><td>Two</td></tr> <tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED</td></tr> </table> <input type="checkbox"/> RETURN FROM OVERSEAS <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>ETA</td></tr> <tr><td> </td></tr> <tr><td>STATION</td></tr> <tr><td> </td></tr> <tr><td>NO. OF DEP.'S</td></tr> <tr><td> </td></tr> </table>		ETD	September 1971	STATION	Lima, Peru	TDY OR PCS	PCS	TYPE OF COVER	State	NO. OF DEPENDENTS TO ACCOMPANY	Two	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED	ETA		STATION		NO. OF DEP.'S	
ETD																				
September 1971																				
STATION																				
Lima, Peru																				
TDY OR PCS																				
PCS																				
TYPE OF COVER																				
State																				
NO. OF DEPENDENTS TO ACCOMPANY																				
Two																				
NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED																				
ETA																				
STATION																				
NO. OF DEP.'S																				
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER																		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE Joan Wright																		
		ROOM NO. & BUILDING 3D 5300 Hqs	EXT. 7431																	

10. COMMENTS	
Dorothy	wife 31 Jan 1938
Kendra	daug 3 Mar 1971
Please schedule appointments week of 31 May 1971.	
11. REPORT OF EVALUATION COMPLETED FOR OS PCS 16-87R	
SPERRY PRESTON	
DATE	SIGNATURE FOR CHIEF OF MEDICAL STAFF

SECRET

1. FOLDER, BUREAU (110) 407-43-0230		2. FILE # 4703		3. CASE #	
4. OFFICE, DIVISION, BRANCH (OF OVERSEAS STATION AND DISTRICT/Consulate) (state)		5. PRESENT POSITION		6. EXTENSION	
7. PROPOSED STATION Lima, Peru		8. PROPOSED POSITION (Title, Number, Grade) Ops Officer/0630/GS-13			
9. TYPE OF COVER AT NEW STATION State		10. ESTIMATED DATE OF Sept 71		11. NO. OF DEPENDENTS TO Accompany	
12. COMMENTS Vico: Donald J. Venuto Please schedule appointments week of 31 May 1971/ Mr. Flores' Spanish capabilities are native reading and high speaking which more than meets the language requirements of intermediate reading and speaking for the Station.					
13. DATE OF REQUEST 11 Mar 71		14. SIGNATURE OF REQUESTING OFFICIAL Joan Wright		15. ROOM NUMBER AND BUILDING NO. EXTENSION 3D 5309 Bqs 7431	
17. OFFICE OF QUALIFIED OVERSEAS POS 11 June 1971 Joe W. Cline, OHS/pro					
16. OFFICE OF SECURITY DISPOSITION					
18. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION					
REQUEST FOR PCS OVERSEAS EVALUATION					

FORM 259a

SECRET

(6)

SECRET

1. NAME (Last, First, Middle) Flores, Daniel		2. DATE OF BIRTH 4 August 1935		3. GRADE GS-08	
4. OFFICE DIVISION, BRANCH (or overseas station and existing cover if lateral assignment) DDP/WII/4		5. PRESENT POSITION Ops Officer		6. EMPLOYEE EXTENSION 6815	
7. PROPOSED STATION Guayaquil		8. PROPOSED POSITION (Title, Number, Grade) Ops Off 0376 GS-09			
9. TYPE OF COVER AT NEW STATION Department of State		10. ESTIMATED DATE OF DEPARTURE o/a 27 April 69		11. NO. OF DEPENDENTS TO ACCOMPANY 1	
12. COMMENTS <p>VICE KENNETH R. GOODMAN WILL INTEGRATE IN 14 APRIL 1969 FSI CLASS 89'B ATTACHED.</p> <p align="right"><i>[Signature]</i> 10 MAR 1969</p>					
13. DATE OF REQUEST 6 March 1969		14. SIGNATURE OF REQUESTING OFFICIAL <i>PPMacDougall</i> PPMacDougall		15. ROOM NUMBER AND BUILDING 3D5309 Hqs.	
16. EXTENSION 6815					
17. OFFICE OF MEDICAL SERVICES DISPOSITION					
18. OFFICE OF SECURITY DISPOSITION					
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION <p>25 MAR 1969 QUALIFIED <i>726011</i> CHAIRMAN, OVERSEAS</p>					
REQUEST FOR PCS OVERSEAS EVALUATION					

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		DATE OF REQUEST 6 March 1969	
2. NAME (Last, First, Middle) Flores, Daniel (dependent)		3. POSITION TITLE Ops Officer	
5. OFFICE, DIVISION, BRANCH DDP/WII/4		4. GRADE GS-08	
		6. EMPLOYEE'S EXT. 6815	
7. PURPOSE OF EVALUATION			
<input type="checkbox"/> PRE-EMPLOYMENT <input type="checkbox"/> ENTRANCE ON DUTY <input type="checkbox"/> TDY STANDBY <input type="checkbox"/> SPECIAL TRAINING <input type="checkbox"/> ANNUAL <input type="checkbox"/> RETURN TO DUTY <input type="checkbox"/> FITNESS FOR DUTY <input type="checkbox"/> MEDICAL RETIREMENT		<input type="checkbox"/> TDY <input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT <div style="border: 1px solid black; padding: 5px; margin: 5px;"> PTD. o/a 27 April 1969 STATION Guayaquil TDY OR PCS PCS TYPE OF COVER Department of State NO. OF DEPENDENTS TO ACCOMPANY 1 NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 50) ATTACHED 2 </div> <input type="checkbox"/> RETURN FROM OVERSEAS <div style="border: 1px solid black; padding: 5px; margin: 5px;"> LTA STATION NO. OF DEP.'S </div>	
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE PPMacDougall WII/Personnel	
		ROOM NO. & BUILDING 3D5309 Hqs.	
		EXT. 6815	
10. COMMENTS Wife - Dorothy A. - 1/31/35			
<i>PPMacDougall</i>			
11. REPORTING OFFICER QUALIFIED FOR PROPOSED OS PCS			
*A-71-53			
DATE SPERRY PRESTON		SIGNATURE FOR CHIEF OF MEDICAL STAFF	

SECRET


1. NAME (Last, First, Middle) Flores, Daniel		2. DATE OF BIRTH 4 August 1935		3. GRADE GS-09	
4. OFFICE, DIVISION, BRANCH (or overseas station and existing cover if lateral assignment) DDP/WI/4		5. PRESENT POSITION Ops Officer		6. EMPLOYEE EXTENSION 6815	
7. PROPOSED STATION Guayaquil		8. PROPOSED POSITION (Title, Number, Grade) Ops Off 0376 GS-09			
9. TYPE OF COVER AT NEW STATION Department of State		10. ESTIMATED DATE OF DEPARTURE c/a 27 April 69		11. NO. OF DEPENDENTS TO ACCOMPANY 1	
12. COMMENTS VICE KENNETH R. GOODMAN WILL INTEGRATE IN 14 APRIL 1969 FBI CLASS 89's ATTACHED.					
13. DATE OF REQUEST 6 March 1969		14. SIGNATURE OF REQUESTING OFFICIAL PPMacDougall		15. ROOM NUMBER AND BUILDING 3D5309 Hqs.	
16. EXTENSION 6815					
17. OFFICE OF MEDICAL SERVICES DISPOSITION					
18. OFFICE OF SECURITY DISPOSITION					
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION MEDICALLY QUALIFIED FOR PROPOSED OS PCS. DONALD FARLEY 13 21 69					
REQUEST FOR PCS OVERSEAS EVALUATION					

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST 6 October 1961	
2. NAME (Last, First, Middle) FIDRUS, DANIEL		3. POSITION TITLE File Clerk	
5. OFFICE, DIVISION, BRANCH DDP/OPBR		4. GRADE GS-04	
		6. EMPLOYEE'S EXT. 	
7. PURPOSE OF EVALUATION			
<input type="checkbox"/> PRE-EMPLOYMENT <input type="checkbox"/> ENTRANCE ON DUTY <input checked="" type="checkbox"/> XXXXXXXXXXXXXX <input type="checkbox"/> TDY STANDBY <input type="checkbox"/> SPECIAL TRAINING <input type="checkbox"/> ANNUAL <input type="checkbox"/> RETURN TO DUTY <input type="checkbox"/> FITNESS FOR DUTY <input type="checkbox"/> MEDICAL RETIREMENT		<input type="checkbox"/> NOGS/TDY <input type="checkbox"/> OVERSEAS ASSIGNMENT <div style="border: 1px solid black; padding: 2px;"> ETD STATION TDY OR PCS TYPE OF COVER NO. OF DEPENDENTS TO ACCOMPANY NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED </div> <input type="checkbox"/> RETURN FROM OVERSEAS <div style="border: 1px solid black; padding: 2px;"> EIA STATION NO. OF DEPTS </div>	
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER	
<input type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE Chirley Wells ROOM NO. & BUILDING BCI 3016 164th Capdet	
		EXT. 2781	

10. POINT OF DISCUSSION COMMENTS <div style="text-align: center;">1017322.MART</div>	
11. REPORT OF EVALUATION NOV 5 1961	
DATE 12 NOV 61	SIGNATURE FOR CHIEF OF MEDICAL STAFF OFFICE OF MEDICAL STAFF

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REQUEST FOR PRE-EMPLOYMENT MEDICAL EVALUATION			1. DATE 6 October 1961	
2. NAME (Last) PIORES,		(First) DANIEL	(Middle)	
4. ORGANIZATIONAL ASSIGNMENT DDP/OPSER		5. POSITION, TITLE AND GRADE File Clerk GS-04		
6. MEDICAL STAFF REQUESTED TO CHECK DESIRED ACTION BELOW, RETURN ORIGINAL COPY TO OFFICE OF PERSONNEL.				
<input type="checkbox"/> Approve Processing for E. O. D.		<input checked="" type="checkbox"/> Hold Pending Receipt of Addi- tional Medical Information (Form Letters Attached)		<input checked="" type="checkbox"/> Request Pre-Employment Medical Examination
				<input type="checkbox"/> Rejected For Medical Reasons
7. REMARKS 259 Forwarded as of 6 October 1961				
 Signature for Medical Staff				

FORM NO. 570
1 MAY 58

Obtulate Previous Editions

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QUALIFICATIONS UPDATE

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS

Note that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 440, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5B-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

SECTION I							BIOGRAPHIC AND POSITION DATA			
EMP. SER. NO. 036130		NAME (Last-First-Middle) Flores, Daniel				DATE OF BIRTH 08/04/35				
SECTION II										
EDUCATION										
HIGH SCHOOL										
LAST HIGH SCHOOL ATTENDED			ADDRESS (City, State, Country)			YEARS ATTENDED (From-To)		GRADUATE		
								<input type="checkbox"/> YES <input type="checkbox"/> NO		
COLLEGE OR UNIVERSITY STUDY										
NAME AND LOCATION OF COLLEGE OR UNIVERSITY			SUBJECT		YEARS ATTENDED FROM-TO	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM/OTR. HRS. (Specify)		
			MAJOR	MINOR						
1. American University, Washington, DC			Political Science		1962-1967	B.A.	1967	120 hrs		
2.										
IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.										
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS										
NAME AND ADDRESS OF SCHOOL			STUDY OR SPECIALIZATION			FROM	TO	NO. OF MONTHS		
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE										
NAME AND ADDRESS OF SCHOOL			STUDY OR SPECIALIZATION			FROM	TO	NO. OF MONTHS		
SECTION III										
MARITAL STATUS										
1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried?) SPECIFY:										
2. NAME OF SPOUSE (Last) (First) (Middle) (Maiden)										
3. DATE OF BIRTH										
4. PLACE OF BIRTH (City, State, Country)										
5. OCCUPATION										
6. PRESENT EMPLOYER										
7. CITIZENSHIP										
8. FORMER CITIZENSHIP(S) COUNTRY(IES)										
9. DATE U.S. CITIZENSHIP ACQUIRED										
SECTION IV										
DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE										
NAME		RELATIONSHIP	DATE AND PLACE OF BIRTH		CITIZENSHIP	PERMANENT ADDRESS				
1. <input type="checkbox"/> ADD <input type="checkbox"/> DELETE										
2. <input type="checkbox"/> ADD <input type="checkbox"/> DELETE										
3. <input type="checkbox"/> ADD <input type="checkbox"/> DELETE										

FORM 440-1 8-68

SECRET

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(When Filled In)

SECTION V - GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL									
NAME OF REGION OR COUNTRY		TYPE OF SPECIALIZED KNOWLEDGE		DATES OF TRAVEL OR RESIDENCE		DATE & PLACE OF STUDY		KNOWLEDGE ACQUIRED BY CHECK IN	
								TEST	TRAVEL
								STUDY	WORK ASSIGNMENT

SECTION VI - TYPING AND STENOGRAPHIC SKILLS									
1. TYPING (WPM) 2. SHORTHAND (WPM) 3. INDICATE SHORTHAND SYSTEM USED - CHECK ALL APPROPRIATE ITEM									
<input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENOGRAPHY <input type="checkbox"/> OTHER SPECIFY:									

SECTION VII - SPECIAL QUALIFICATIONS									
PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED									

SECTION VIII - MILITARY SERVICE									
CURRENT DRAFT STATUS									
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?					2. NEW CLASSIFICATION				
<input type="checkbox"/> YES <input type="checkbox"/> NO									
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS					4. IF DEFERRED, GIVE REASON				
MILITARY RESERVE, NATIONAL GUARD STATUS									
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG					<input type="checkbox"/> ARMY <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> AIR NATIONAL GUARD				
1. CURRENT RANK, GRADE OR RATE		2. DATE OF APPOINTMENT IN CURRENT RANK			3. EXPIRATION DATE OF CURRENT OBLIGATION				
4. CHECK CURRENT RESERVE CATEGORY					<input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (ACTIVE) <input type="checkbox"/> STANDBY (INACTIVE) <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED				
5. MILITARY MOBILIZATION ASSIGNMENT					6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED				
MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)									
NAME AND ADDRESS OF SCHOOL				STUDY OR SPECIALIZATION			DATE COMPLETED		

SECTION IX - PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS									
NAME AND CHAPTER			ADDRESS (Number, Street, City, State, Country)					DATE OF MEMBERSHIP	
								FROM TO	

SECTION X - SIGNATURE									
<div style="display: flex; justify-content: space-between;"> <div> <p>DATE: 21 June 1961</p> </div> <div> <p>SIGNATURE: [Signature]</p> </div> </div>									

SECRET

Name: FLETER, Daniel

Date of Birth: 10/25/35

Date of Graduation: 5-62

Date & Place of Birth: 4-8-35, San Marcos, Texas

Non-degree

Wash. Sem.

THE AMERICAN COLLEGE
WASHINGTON, DISTRICT OF COLUMBIA

ADMISSION RECORD: Full Standing

PREVIOUS RECORD: San Marcos High School, Texas 5/55

TOOLS OF RESEARCH PASSED:

COMPREHENSIVE EXAMINATIONS PASSED:

CATALOG NUMBER	TITLE OF COURSE	SEM. NUMBER	GRADE	QUALITY POINTS
FALL 62				
10300	INTRO ECONOMICS I	3	C	3
10300	ENGLISH COMP I	3	C	3
10300	BACKGROUNDS CIV I	3	D	3
10300	INTRO WORLD POL	3	C	3
SPR 63				
10300	INTRO ECONOMICS II	3	D	3
10300	AMERICAN GOVT NATL	3	D	3
27101	ENGLISH COMP II	3	F	1-63
10301	BACKGROUNDS CIV II	3	C	3
FALL 1963				
3101	COMP & READING II	3	B	6
3101	ECON ANAL INCOME	3	F	1
SPRING 1964				
10301	INTRO PHILOSOPHY	3	C	3
10301	INTRO GOVT ST & LOG	3	F	1
SPRING 1965				
10301	SPAN. BIOLOGY	3	C	3
10301	INTRO POL INT POWRS	3	B	6
10301	INTRO POL PHILOSOPHY	3	C	3
10301	STATE GOVERNMENT	3	B	6
SUMMER 1965				
10301	PHYS. SCIENCES	3	B	6
10301	INT & NEW TESTAMENT (Course cancelled by Univ.)	3		
FALL 1965				
10301	INTERNATL. LAW 460-48-6230	3	A	9
10301	INTRO LATIN AMER	3	C	3
10301	COMPARATIVE RELIGION	3	C	3
10301	INTRO POLIT THEORY	3	C	3
10301	INTRO PSYCHOLOGY	3	D	3
SPRING 1966				
10301	COLLEGE OF ARTS & SCIENCES	3	A	9
10301	INTRO POLIT THEORY	3	A	9
SUMMER 1966				
10301	COLLEGE OF ARTS & SCIENCES	3		
10301	RUSSIA SINCE 1917	3	C	6
10301	ICHRS ADV SPAN II	3	B	6
10301	PROB RELIG THOUGHT	3	C	3
FALL 1966				
10301	COLLEGE OF ARTS & SCIENCES	3		
10301	CONTEMP INT POLIT	3	D	6
10301	LATIN AMER SEM I	9	A	27
10301	GOLDEN AGE NOVEL	3	A	9
10301	GOV & POL LAT AMER	3	C	3
SPRING 1967				
10301	COLLEGE OF ARTS & SCIENCES	3		
10301	INTERNATL. LAW & ORGANIZA	3	B	6
10301	LAT AMER INTERNATL RELA	3	A	9
10301	MODERN SPANISH DRAMA	3	A	6
10301	SPANISH 19TH C NOVEL	3	B	6
10301	U S POLITICAL SYSTEM I	3	C	3

Admitted Spring 1966, Fall 1966.

JUL 12 1967

John E. B. B.

SECRET

(When Filled In)

A-1-A

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QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS.

SECTION I

BIOGRAPHIC AND POSITION DATA

1. EMP. SER. NO.	2. NAME (Last, First, Middle)	3. SEX	4. DATE OF BIRTH	5. SCHEDULE, GRADE, STEP
086130	FLORES DANIEL		08/04/35	GS--05-04
6. SO	7. POSITION/TITLE	8. OFFICE OF ASSIGNMENT	9. LOCATION (Agency, City)	
D	INTELLIGENCE CLERK	WM	WASH., D.C.	

SECTION II

AGENCY OVERSEAS SERVICE

AREA	DATE TO	FROM	TO
AC OVERSEAS SERVICE			

SECTION III

EDUCATION

DEGREE	MAJOR FIELD	COURSE	YEAR
AC COLLEGE DEGREE ON RECORD			

SECRET

 14-00000
 14-00000
 14-00000

07 MAY 1970

14-00000

SECRET

(When Filled In)

SECTION III						
EDUCATION (Cont'd)						
HIGH SCHOOL						
LAST HIGH SCHOOL ATTENDED	ADDRESS (City, State, Zip)		YEARS ATTENDED (From To)	GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO		
COLLEGE OR UNIVERSITY STUDY						
NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED (From To)	DEGREE RECEIVED	YEAR RECEIVED	HONORARY / G.D. (HONORARY)
	MAJOR	MINOR				
1 The American University Washington, D.C.	Pol.Sci.	Spanish Literature	1962 - 1967	A degree will be conferred in July 1967.		11th Sem. Hrs.
2						
3						
4						
5 IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT						
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS						
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS	
1						
2						
3						
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE						
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS	
1						
2						
3						
4						
5						
AGENCY SPONSORED EDUCATION						
Specify which, if any, of the education shown in Section III was Agency sponsored						
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS	
1						
2						
3						
4						
5						

SECRET

SECRET

(When Filled In)

SECTION IV GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY CHECK IN			
				RECEIVED OFFICE	TRAVEL	STUDY	WORK ASSIGNMENT
Bolivia	Economic, topographic, cultural and political.	Nov. 1959- Jan. 1960	American Univ. 1962-1967	X		X	
Peru	Topographic, cultural, and political.	Jan. 1960- Nov. 1960	American Univ. 1962-1967	X		X	
Latin America in general.	Economic, topographic, cultural, and political.		American Univ. 1962-1967			X	

SECTION V TYPING AND STENOGRAPHIC SKILLS			
1. TYPING (WPM) 45	2. SHORTHAND (WPM)	3. INDICATE SHORTHAND SYSTEM USED. CHECK IN APPROPRIATE ITEM. <input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENOTYPE <input type="checkbox"/> OTHER, SPECIFY	
4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (comparator, mimeograph, card punch, etc.)			

SECTION VI SPECIAL QUALIFICATIONS	
1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH.	
2. EXCLUDING BUSINESS EQUIPMENT OR MACHINES WHICH YOU MAY HAVE LISTED IN ITEM 4, SECTION V, LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT AND MACHINES SUCH AS OPERATION OF RADIO TRANSMITTERS (indicate CW speed, sending & receiving), OFFSET PRESS, TURRET LATHE, LOP AND OTHER SCIENTIFIC & PROFESSIONAL DEVICES.	
3. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION SUCH AS PHOTO, ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, MEDICAL TECHNICIAN, PSYCHOLOGIST, PHYSICIAN, ETC? <input type="checkbox"/> YES <input type="checkbox"/> NO	
4. IF YOU HAVE ANSWERED "YES" TO ITEM 3 ABOVE, INDICATE KIND OF LICENSE OR CERTIFICATION AND THE ISSUING STATE, MUNICIPALITY, ETC. (Provide license registry number, if known)	5. FIRST LICENSE/CERTIFICATE year of issue 6. LATEST LICENSE/CERTIFICATE year of issue
7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR. do NOT submit copies unless requested. INDICATE THE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (see heading for article, articles, general interest subjects, novels, short stories, etc.)	
8. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED	
9. PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE	

SECRET

- 3 -

when filled in.

[illegible]

SECRET
- 7 -

SECRET
(When Filled In)

LANGUAGE DATA RECORD	
PART I-GENERAL	
1. NAME (Last-First-Middle) (17-74) <i>FLORES, RONNIE</i>	2. DATE OF BIRTH (75-10) <div style="display: flex; justify-content: space-between;"> <div>MONTH</div> <div>DAY</div> <div>YEAR</div> </div> <i>Aug. 1, 1955</i>
3. LANGUAGE (11-33) <i>SPANISH 720</i>	4. TODAY'S DATE (34-37) <div style="display: flex; justify-content: space-between;"> <div>MONTH</div> <div>DAY</div> <div>YEAR</div> </div> <i>MARCH 12 1962</i>
5. <input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE	
PART II-LANGUAGE ELEMENTS	
SECTION A. Reading (40)	
1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.	
② I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY.	
3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (newspapers, reference materials, etc.), USING THE DICTIONARY FREQUENTLY.	
4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS; NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY.	
5. I HAVE NO READING ABILITY IN THE LANGUAGE.	
SECTION B. Writing (41)	
1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT USING THE DICTIONARY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH VERY FEW GRAMMATICAL ERRORS, IN NATIVE STYLE, USING THE DICTIONARY ONLY RARELY.	
2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY.	
③ I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY.	
4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY FREQUENTLY.	
5. I CANNOT WRITE IN THE LANGUAGE.	
SECTION C. Pronunciation (42)	
① MY PRONUNCIATION IS NATIVE.	
2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.	
3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.	
4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.	
5. I HAVE NO SKILL IN PRONUNCIATION.	
CONTINUE ON REVERSE SIDE	

CONTINUATION OF PART II—LANGUAGE ELEMENTS

SECTION D.

Speaking (43)

1. I SPEAK FLUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS; I CONVERSE FREELY AND IDIOMATICALLY IN ALL FIELDS WITH WHICH I AM FAMILIAR.
2. I SPEAK FLUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I EMPLOY SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.
3. I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.
4. I MANAGE TO GET ALONG IN THE MOST COMMON SITUATIONS OF DAILY LIFE AND TRAVEL.
5. I HAVE NO ABILITY TO USE THE LANGUAGE IN ANY OF THE ABOVE RESPECTS.

SECTION E.

Understanding (44)

1. I UNDERSTAND NON-TECHNICAL CONVERSATION ON ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND NEARLY EVERYTHING I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
2. I UNDERSTAND NON-TECHNICAL CONVERSATION ON NEARLY ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MOST OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES, INCLUDING MOST JOKE AND PUNS.
3. I UNDERSTAND NEARLY ALL CONVERSATION ON TOPICS OF DAILY LIFE AND TRAVEL, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MUCH OF WHAT I HEAR ON THE RADIO, AND AT THE MOVIES, PLAYS, AND LECTURES.
4. I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
5. I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.

BEFORE CONTINUING — CHECK PART II TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.

PART III—EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)

1. I HAVE HAD EXPERIENCE AS A TRANSLATOR.
2. I HAVE HAD EXPERIENCE AS AN INTERPRETER.
3. BOTH OF THE ABOVE STATEMENTS APPLY.
4. NONE OF THE ABOVE STATEMENTS APPLY.

PART IV—CERTIFICATION

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 25-115, PAR. 1C(4). I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE I BECOME ELIGIBLE FOR AN AWARD, AND THAT IRRESPECTIVE OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE CUMULATIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.

DATE SIGNED

March 13, 1962

SIGNATURE

Daniel S. Lee

(46)

(47)

DO NOT USE THIS SPACE EXCEPT BY		PERSONAL HISTORY STATEMENT		DATE: 10 OCT 6, 1961	
INSTRUCTIONS					
<p>1. Answer all questions completely or check appropriate box. If question is not applicable, write "NA". Write "Unknown" only if you do not know the answer and it cannot be obtained from personal records. Use blank space at end of form for extra details on any question for which you have insufficient space.</p> <p>2. Type, print or write carefully; illegible or incomplete forms will not receive consideration.</p> <p>3. Consider your answers carefully. Your signature at the end of this form will certify to their correctness. Careful completion of all applicable questions will permit review of your qualifications to the best advantage.</p>					
SECTION I GENERAL PERSONAL AND PHYSICAL DATA					
1. FULL NAME (Last-First-Middle)		2. AGE		3. SEX	
FLORES, Daniel		26		<input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE	
4. HEIGHT	5. WEIGHT	6. COLOR OF EYES	7. COLOR OF HAIR	8. TYPE COMPLEXION	9. TYPE BUILD
5' 8"	165 lbs.	Brown	Black	Dark	Medium
10. SCARS (Type and Location)					
Right cheek, one-half inch scar; left upper lip, one-quarter inch scar; both received playing football					
11. OTHER DISTINGUISHING PHYSICAL FEATURES					
None					
12. CURRENT ADDRESS (No., Street, City, Zone, State and Country)			13. PERMANENT ADDRESS (No., Street, City, Zone, State and Country) AND PHONE NO.		
2828 Connecticut Avenue, N. W., #203 Washington 8, D. C.			2828 Connecticut Avenue, N. W. #203 - Washington 8, D. C.		
14. CURRENT PHONE NO.		15. OFFICE PHONE NO. & EXT.		16. LEGAL RESIDENCE (State, Territory or Country)	
264-8322		None		Washington, District of Columbia	
17. NICKNAMES		18. OTHER NAMES YOU HAVE USED			
Dan		None			
19. INDICATE CIRCUMSTANCES (including Length of Time) UNDER WHICH YOU HAVE EVER USED THESE NAMES					
Personal acquaintances - twelve years					
20. IF LEGAL CHANGE, GIVE PARTICULARS (Where and by what Authority)					
NA					
SECTION II POSITION DATA					
1. INDICATE THE TYPE OF WORK OR POSITION FOR WHICH YOU ARE APPLYING					
Any phase of communications; administration; or personnel work.					
2. INDICATE THE LOWEST ANNUAL ENTRANCE SALARY YOU WILL ACCEPT (You will not be considered for any position with a lower entrance salary).			3. DATE AVAILABLE FOR EMPLOYMENT		
\$ 4,250.00			Immediately		
4. INDICATE YOUR WILLINGNESS TO TRAVEL					
<input type="checkbox"/> OCCASIONALLY <input checked="" type="checkbox"/> FREQUENTLY <input type="checkbox"/> CONSTANTLY <input type="checkbox"/> OTHER					
5. INDICATE YOUR WILLINGNESS TO ACCEPT ASSIGNMENT IN THE FOLLOWING LOCATIONS (Check (X) each item applicable)					
<input checked="" type="checkbox"/> WASHINGTON, D. C. <input type="checkbox"/> ANYWHERE IN U.S. <input type="checkbox"/> CERTAIN LOCATIONS ONLY (Specify)					
6. INDICATE WHAT RESERVATIONS YOU WOULD PLACE ON ASSIGNMENTS OUTSIDE THE WASHINGTON, D. C. AREA.					
I would be willing to travel within the United States provided said travel would not involve a permanent move whereby my legal residence would be changed. However, it is my wish to live overseas on a permanent basis.					



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SECTION III		CITIZENSHIP	
1. DATE OF BIRTH	2. PLACE OF BIRTH (City, State, Country)	3. PRESENT CITIZENSHIP (Country)	
APRIL 14, 1915	SAN MARCOS, TEXAS	UNITED STATES OF AMERICA	
4. CITIZENSHIP ACQUIRED BY	5. DATE NATURALIZED	6. NATURALIZATION CERTIFICATE NO.	
BIRTH	1915	NA	
7. COURT ISSUED NATURALIZATION CERTIFICATE		8. ISSUED BY (City, State, Country)	
NA		NA	
9. HAVE YOU HELD PREVIOUS NATIONALITY		10. IF YES, GIVE NAME OF COUNTRY	
YES NO		NA	
11. GIVE PARTICULARS CONCERNING PREVIOUS NATIONALITY.			
NA			
12. HAVE YOU TAKEN STEPS TO CHANGE PRESENT CITIZENSHIP		13. GIVE PARTICULARS	
YES NO		NA	
14. IF YOU HAVE APPLIED FOR U.S. CITIZENSHIP, WHAT IS PRESENT STATUS OF YOUR APPLICATION (First Papers, Etc.)			
NA			
15. DATE OF ARRIVAL IN U.S.	16. PORT OF ENTRY	17. ON PASSPORT OF WHAT COUNTRY	
NA	NA	NA	
18. LAST U.S. VISA (No., Type, Place of Issue)	19. DATE VISA ISSUED		
NA	NA		
SECTION IV			
EDUCATION			
1. CHECK (X) HIGHEST LEVEL OF EDUCATION ATTAINED			
LESS THAN HIGH SCHOOL GRADUATE		OVER TWO YEARS OF COLLEGE NO DEGREE	
HIGH SCHOOL GRADUATE		BACHELOR'S DEGREE	
TRADE BUSINESS OR COMMERCIAL SCHOOL GRADUATE		GRADUATE STUDY LEADING TO HIGHER DEGREE	
X TWO YEARS COLLEGE OR LESS		MASTER'S DEGREE DOCTOR'S DEGREE	
2. ELEMENTARY SCHOOL			
1. NAME OF ELEMENTARY SCHOOL		2. ADDRESS (City, State, Country)	
San Marcos Elementary School		San Marcos, Texas, U.S.A.	
3. DATES ATTENDED (From and To)		4. GRADUATE	
Sept., 1912 - May, 1915		YES NO	
3. HIGH SCHOOL			
1. NAME OF HIGH SCHOOL		2. ADDRESS (City, State, Country)	
San Marcos High School		San Marcos, Texas, U.S.A.	
3. DATES ATTENDED (From and To)		4. GRADUATE	
Sept., 1915 - May, 1918		YES NO	
4. COLLEGE OR UNIVERSITY STUDY			
1. NAME OF COLLEGE OR UNIVERSITY		2. ADDRESS (City, State, Country)	
3. DATES ATTENDED (From and To)		4. GRADUATE	
5. DEGREE		6. DATE	
7. NAME AND LOCATION OF COLLEGE OR UNIVERSITY		8. ADDRESS (City, State, Country)	
9. DATES ATTENDED (From and To)		10. GRADUATE	
11. DEGREE		12. DATE	
13. NAME AND LOCATION OF COLLEGE OR UNIVERSITY		14. ADDRESS (City, State, Country)	
15. DATES ATTENDED (From and To)		16. GRADUATE	
17. DEGREE		18. DATE	
19. NAME AND LOCATION OF COLLEGE OR UNIVERSITY		20. ADDRESS (City, State, Country)	
21. DATES ATTENDED (From and To)		22. GRADUATE	
23. DEGREE		24. DATE	

SECTION IV CONTINUED FROM PAGE 1

5. IF A GRADUATE DEGREE HAS BEEN NOTED, INDICATE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS. INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

NA

6. TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	MONTHS
NA				

7. MILITARY TRAINING (FULL TIME DUTY IN SPECIALIZED SCHOOLS SUCH AS ORDNANCE, INTELLIGENCE, COMMUNICATIONS, ETC.)

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	MONTHS
Marine Security Guard School - Henderson Hall Hq. Marine Corps, Washington 25, D.C.	Security Guard Training	9/22/55	10/31/55	(5 wks)

8. OTHER EDUCATIONAL TRAINING NOT INDICATED ABOVE

Weapons Training in Marine Corps.
Acted as partisan during cold weather training at Bridgeport,
California (Pickle Meadows - TMS).

SECTION V

FOREIGN LANGUAGE ABILITIES

1. LANGUAGE (List below each language in which you possess any degree of competence. Indicate your proficiency in Read, Write or Speak by placing a check (X) in the appropriate boxes.)	2. COMPETENCE - IN ORDER LISTED						3. HOW ACQUIRED			
	Read		Write		Speak		NATIVE OF COUNTRY	PRO-LOVED RES. LICENCE	CONTACT (with parents etc.)	ACADEMIC STUDY (all levels)
	Read	Write	Read	Write	Read	Write				
Spanish	X		X		X					X

2. IF YOU HAVE CHECKED "ACADEMIC STUDY" INDICATE LENGTH AND INTENSIVENESS OF STUDY

NA

3. IF YOU HAVE CHECKED "PRO-LOVED RES. LICENCE" INDICATE DIFFERENCES IN SPOKEN AND WRITTEN FORM SO THAT YOU CAN COMPREHEND THEM

NA

4. DESCRIBE YOUR ABILITY TO INTERPRET AND TRANSLATE FROM THE FOREIGN LANGUAGE TO ENGLISH AND VICE VERSA

Could act as literal interpreter at almost any level.

5. IF YOU HAVE CHECKED "CONTACT (with parents etc.)" INDICATE LENGTH AND INTENSIVENESS OF STUDY

SECTION VI GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
1. LIST BELOW ANY FOREIGN REGIONS OR COUNTRIES IN WHICH YOU HAVE TRAVELED OR TO WHOM KNOWLEDGE AS A RESULT OF RESIDENCE, STUDY OR OTHER ACTIVITY. INDICATE TYPE OF KNOWLEDGE SUCH AS TERRAIN, HARBORS, UTILITIES, RAILROADS, INDUSTRIES, POLITICAL PARTIES, ETC.							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF RESIDENCE OR TRAVEL	DATES AND PLACE OF STUDY	KNOWLEDGE ACQUIRED BY			
				RESIDENCE	TRAVEL	STUDY	WORK ASSIGNMENT
Bolivia	General knowledge	11/13/58 to 1/1/60		X			
Peru	General knowledge	1/1/60 to 11/30/60		X			
Chile		6/15/59 to 6/21/59			X		
Argentina		6/21/59 to 6/30/59			X		
Uruguay		6/30/59 to 7/2/59			X		
2. INDICATE THE PURPOSE OF VISIT, RESIDENCE, OR TRAVEL IN EACH OF THE REGIONS OR COUNTRIES LISTED ABOVE.							
Marine Security Guard - American Embassy - Bolivia and Peru Vacation - Chile; Argentina; Uruguay; Panama							
3. UNITED STATES PASSPORT NUMBER AND EXPIRATION DATE, IF ISSUED							
No. 174850 (SP-35575) Passport has been cancelled.							
SECTION VII TYPING AND STENOGRAPHIC SKILLS							
1. TYPING (wpm)		2. SHORTHAND (wpm)		3. SHORTHAND SYSTEM USED - CHECK ALL APPROPRIATE ITEM			
45 wpm		None		SHELLS SPEEDWRITING STENO TYPE OTHER (Specify)			
4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (Computers, Mimeograph, Card Punch, Etc.).							
Thermofax, mimeograph, switchboard							
SECTION VIII SPECIAL QUALIFICATIONS							
1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH.							
Football - good Basketball - fair Swimming - good Reading - average Contract Bridge - very good							
2. INDICATE ANY SPECIAL QUALIFICATIONS RESULTING FROM EXPERIENCE OR TRAINING WHICH MIGHT FIT YOU FOR A PARTICULAR POSITION OR TYPE OF WORK.							
None to my knowledge							
3. INCLUDING BUSINESS EQUIPMENT OR MACHINES WITH WHICH YOU HAVE USED, LIST ANY SPECIAL SKILLS YOU POSSESS RELATIVE TO OTHERS. POINT AND MARKING SUCH AS OPERATING OR STATISTICAL MACHINES (Index card CF speed, naming and recording, GPO Press, Turbot Lathe, Scientific and Professional Devices).							
None							

SECTION VIII CONTINUED FROM PAGE 8	
6. ARE YOU NOW OR HAVE YOU EVER BEEN QUALIFIED OR CERTIFIED AS MEMBER OF ANY OF THE FOLLOWING PROFESSIONS OR OCCUPATIONS? ELECTRICIAN RADIO OPERATOR TEACHER LABORER CPE MEDICAL TECHNICIAN ETC.	
7. IF YOU HAVE ANSWERED "YES" TO ABOVE, INDICATE KIND OF LICENSE AND STATE IN WHICH IT WAS ISSUED. (Provide License/Registration Number, if known).	
NA	
8. FIRST LICENSE OR CERTIFICATE (Year of issue)	9. LATEST LICENSE OR CERTIFICATE (Year of issue)
NA	NA
10. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR. (Give title, address, telephone, city, state, zip code, publication date, and type of writing (News/Editorial or Scientific article, Technical interest article, etc., Short Stories, Etc.).	
None	
11. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED.	
None	
12. LIST PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE.	
Have spoken in my father's church and other churches approximately 150 times. Met and assisted public in Embassies during my tour of duty with the Marine Security Guard.	
13. LIST ANY PROFESSIONAL, ACADEMIC OR HONORARY ASSOCIATIONS OR SOCIETIES IN WHICH YOU ARE NOW OR WERE FORMERLY A MEMBER. LIST ACADEMIC HONORS YOU HAVE RECEIVED.	
None	
SECTION IX EMPLOYMENT HISTORY	
NOTE: (LIST LAST POSITION FIRST.) Indicate chronological history of employment for last 15 years. Account for all periods including casual employment and all periods of unemployment. Give address and state of all past employment. List all civilian employment by a full description of duties, regardless of date. In completing item 13, "Description of Duties," consider your experience carefully and describe meaningful, in a few statements.	
1. INCLUDE DATE (From and To) By No. and 1.	2. NAME OF EMPLOYER (Full name)
From 1949 to 1953	Hillburn's Soda Store
3. ADDRESS (No., Street, City, State, Country)	4. NAME OF SUPERVISOR
San Marcos, Texas	Mr. William Hillburn
5. KIND OF BUSINESS	6. TITLE OF JOB
Drug Store	Fountain attendant
7. SALARY OR BASIC PAY	8. CLASS GRADE (If Federal Service)
	\$12.00 per month
9. DESCRIPTION OF DUTIES	
Employee at soda counter	
10. REASONS FOR LEAVING	
To participate in school events (football).	

SECTION IV - CONTINUED FROM PAGE 3	
1. INCLUSIVE DATES: From and To - By No. and 1st	2. NAME OF EMPLOYING FIRM OR AGENCY
July 1955 - June 1956	Diamond Grocery Store
3. ADDRESS (No., Street, City, State, Country)	
South Guadalupe St., San Marcos, Texas	
4. KIND OF BUSINESS	5. NAME OF SUPERVISOR
Grocery Store	Mr. Ignacio Gonzales
6. TITLE OF JOB	7. SALARY OR EARNINGS 8. CLASS GRADE (If Federal Service)
Butcher	\$20.00 PER WEEK
9. DESCRIPTION OF DUTIES	
Slaughtering and preparing meat for sale as well as actual selling.	
10. REASONS FOR LEAVING	
To attend college?	
1. INCLUSIVE DATES: From and To - By No. and 1st	2. NAME OF EMPLOYING FIRM OR AGENCY
May, 1955 - September, 1955	San Marcos Baptist Academy
3. ADDRESS (No., Street, City, State, Country)	
San Marcos, Texas	
4. KIND OF BUSINESS	5. NAME OF SUPERVISOR
Private School	Mr. John Sparkman
6. TITLE OF JOB	7. SALARY OR EARNINGS 8. CLASS GRADE (If Federal Service)
Painter's Assistant	\$15.00 PER WEEK
9. DESCRIPTION OF DUTIES	
Painted dormitories in the Academy	
10. REASONS FOR LEAVING	
To attend school	
1. INCLUSIVE DATES: From and To - By No. and 1st	2. NAME OF EMPLOYING FIRM OR AGENCY
September, 1956 - July, 1957	Economy Department Stores
3. ADDRESS (No., Street, City, State, Country)	
San Marcos, Texas	
4. KIND OF BUSINESS	5. NAME OF SUPERVISOR
Clothing Store	Mr. Max Mendlovitz
6. TITLE OF JOB	7. SALARY OR EARNINGS 8. CLASS GRADE (If Federal Service)
Sales Clerk	\$30.00 PER WEEK
9. DESCRIPTION OF DUTIES	
Assisted customers in selecting and buying goods.	
10. REASONS FOR LEAVING	
To join the Marine Corps.	
1. INCLUSIVE DATES: From and To - By No. and 1st	2. NAME OF EMPLOYING FIRM OR AGENCY
July 24, 1957 - July 22, 1961	United States Marine Corps
3. ADDRESS (No., Street, City, State, Country)	
Marine Corps Schools, Quantico, Virginia	
4. KIND OF BUSINESS	5. NAME OF SUPERVISOR
Military	Col. John Magruder
6. TITLE OF JOB	7. SALARY OR EARNINGS 8. CLASS GRADE (If Federal Service)
Marine Corps Museum Attendant	\$100.00 PER MONTH Sp4 (E-4)

SECTION IV - CONTINUED FROM PAGE 3

SECTION IX (CONTINUED FROM PAGE 4)			
<p>9. DESCRIPTION OF DUTIES</p> <p>Acted as guide to all visitors entering Museum, explaining Marine Corps history, etc. Also on several occasions acted as interpreter for visiting military personnel from Latin America.</p>			
<p>10. REASONS FOR LEAVING</p> <p>Discharged</p>			
<p>1. INCLUSIVE DATES (From and To - Month and Year)</p> <p>July 28, 1961 - August 30, 1961</p>		<p>2. NAME OF EMPLOYING AGENCY OR AGENCY</p> <p>Ohio Valley Engineering Company</p>	
<p>3. ADDRESS (No., Street, City, State, Country)</p> <p>3. Capital and I Streets, S. W., Washington, D. C.</p>			
<p>4. KIND OF BUSINESS</p> <p>Construction</p>		<p>5. NAME OF SUPERVISOR</p> <p>Mr. L. G. Brice</p>	
<p>6. TITLE OF JOB</p> <p>Laborer</p>		<p>7. SALARY OR EARNINGS</p> <p>2.17 per hour</p>	<p>8. CLASS, GRADE (If Federal Service)</p>
<p>9. DESCRIPTION OF DUTIES</p> <p>Handyman for Company</p>			
<p>10. REASONS FOR LEAVING</p> <p>Temporary work while seeking permanent employment.</p>			
<p>1. INCLUSIVE DATES (From and To - Month and Year)</p>		<p>2. NAME OF EMPLOYING AGENCY OR AGENCY</p>	
<p>3. ADDRESS (No., Street, City, State, Country)</p>			
<p>4. KIND OF BUSINESS</p>		<p>5. NAME OF SUPERVISOR</p>	
<p>6. TITLE OF JOB</p>		<p>7. SALARY OR EARNINGS</p>	<p>8. CLASS, GRADE (If Federal Service)</p>
<p>9. DESCRIPTION OF DUTIES</p>			
<p>10. REASONS FOR LEAVING</p>			
<p>11. IF PRIOR SERVICE WITH THE FEDERAL GOVERNMENT IS NOTED ABOVE, INDICATE THE NUMBER OF YEARS CREDITABLE TOWARD U.S. CIVIL SERVICE RETIREMENT, IF ANY</p> <p>7 1/2 years</p>			
<p>12. HAVE YOU EVER BEEN DISCHARGED OR ASKED TO RESIGN FROM ANY POSITION? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>HAVE YOU LEFT A POSITION UNDER CIRCUMSTANCES WHICH YOU DESIRE TO EXPLAIN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>IF YOUR ANSWER TO EITHER OR BOTH QUESTIONS IS "YES", GIVE DETAILS</p> <p>Honorably discharged from United States Marine Corps.</p>			

SECTION X		MILITARY SERVICE	
1. CURRENT DRAFT STATUS			
1. ARE YOU REGISTERED FOR THE DRAFT UNDER THE UNIVERSAL MILITARY TRAINING AND SERVICE ACT OF 1964 (40 USC 1602)?		2. SELECTED SERVICE CLASSIFICATION	
X YES		3. SELECTIVE SERVICE NO.	
4. IF DEFERRED, GIVE REASON		5. LOCAL DRAFT BOARD NO. OR DESIGNATION AND ADDRESS	
NA		655 - 111 1/2 S. Oak Avenue St. Louis, Mo.	
2. MILITARY SERVICE RECORD			
3. CURRENT AND OR PAST ORGANIZATIONAL MEMBERSHIP			
CHECK (X) AS APPROPRIATE	ARMY	NAVY	MARINE CORPS
			AIR FORCE
			COAST GUARD
			NAVY MARINE CORPS
			GUARD
			FOREIGN ORGAN OR MIL. SERVICE
HAVE SERVED			
NOW SERVING			None
4. BRANCH OR CORPS OF ABOVE CHECKED ORGANIZATION(S)			
Personnel Administration			
5. DATE SEPARATED FROM EXTENDED ACTIVE DUTY (Past service)		6. TOTAL LENGTH OF EXTENDED ACTIVE DUTY IN U.S. ARMED FORCES (Past or Present service)	
25 July, 1961		1 year	
7. DATE ENTERED ACTIVE DUTY		8. TOTAL LENGTH OF ACTIVE DUTY IN FOREIGN MILITARY OR ORGANIZATION	
26 July, 1957			
9. RANK, GRADE OR RATE		10. SERVICE SERIAL OR FILE NUMBER (If now serving, provide current number)	
Capt. (E-4)			
11. PRIMARY MILITARY OCCUPATIONAL SPECIALTY (Use or Designation) AND TITLE		12. CURRENT SERVICE	
0111 - Chief Clerk			
13. SECONDARY MIL. OCCUPATIONAL SPECIALTY (Use or Designation) AND TITLE		14. CURRENT SERVICE	
None			
15. BRIEF DESCRIPTION OF MILITARY DUTIES (Indicate whether applicable to past or current service)			
Past Service: Clerk - Maintained personnel service records. 2 years as Security Guard in the American Embassies in La Paz, Bolivia and Lima, Peru.			
16. CHECK (X) TYPE OF SEPARATION FROM ACTIVE DUTY			
X HONORABLE DISCHARGE		RETIREMENT FOR SERVICE	
X RELEASE TO INACTIVE DUTY		RETIREMENT FOR PHYSICAL DISABILITY	
RETIREMENT FOR AGE		OTHER	
17. CHECK (X) COMPONENT IN WHICH YOU SERVED			
X REGULAR		X RESERVE (Indicate the National and Air National Guard)	
18. CHECK (X) COMPONENT IN WHICH YOU SERVED			
19. MILITARY RESERVE, NATIONAL GUARD AND ROTC STATUS			
1. DO YOU NOW HAVE RESERVE STATUS?		2. ARE YOU NOW A MEMBER OF THE NAT'L. GUARD OR AIR NAT'L. GUARD?	
X YES		YES	
NO		NO	
3. ARE YOU NOW A MEMBER OF THE ROTC?			
X YES			
4. IF YOU HAVE ANSWERED "YES" TO ITEMS 1, 2 OR 3 ABOVE, CHECK COMPONENT MEMBERSHIP BELOW			
ARMY		NAT. GUARD	
X MARINE CORPS		COAST GUARD	
NAVY		NAVY ROTC	
AIR FORCE		AIR ROTC	
AIR NAT'L. GUARD		AIR ROTC	
5. CURRENT RANK, GRADE OR RATE		6. DATE OF APPOINTMENT TO CURRENT RANK	
Capt. (E-4)		January 22, 1962	
7. CHECK (X) CURRENT RESERVE CATEGORY		8. EXPIRATION DATE OF CURRENT RESERVE DCL OR TION	
READY RESERVE			
STANDBY ACTIVE			
STANDBY INACTIVE			
RETIRED			
9. PRIMARY MILITARY OCCUPATIONAL SPECIALTY (Use or Designation) AND TITLE		10. SECONDARY MILITARY OCCUPATIONAL SPECIALTY (Use or Designation) AND TITLE	
0111		None	
11. BRIEF DESCRIPTION OF MILITARY RESERVE DUTIES			
None			
12. ARE YOU CURRENTLY ASSIGNED OR ATTACHED TO A RESERVE, NAT'L. GUARD OR ROTC TRAINING UNIT?			
YES			
13. IF YOU HAVE ANSWERED "YES" TO ITEM 12, GIVE UNIT OR AGENCY AND ADDRESS			
14. HAVE YOU A MILITARY MOBILIZATION ASSIGNMENT?			
YES			
15. IF YOU HAVE ANSWERED "YES" TO ITEM 14, GIVE UNIT OR AGENCY AND ADDRESS			
16. INDICATE TOTAL MILITARY SERVICE YEARS MONTHS			
7 7			
17. WHERE ARE YOUR SERVICE RECORDS KEPT?			
Military Records Division, Department of Defense			

SECTION XI		FINANCIAL STATUS	
1. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY?		YES	<input checked="" type="checkbox"/> NO
2. IF YOUR ANSWER IS "YES" TO THE ABOVE, STATE SOURCE OF OTHER INCOME			
Wife's Income			
3. BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS			
NAME OF INSTITUTION		ADDRESS (No., Street, City, State)	
The Bank of California, N.A.		330 S.W. 5th Avenue, Portland, Oregon	
Union Trust Company		15 and H Streets, N.W., Washington, D.C.	
4. HAVE YOU EVER BEEN IN OR DEPORTED FOR NARCOTICS?		YES	<input checked="" type="checkbox"/> NO
5. IF YOUR ANSWER IS "YES" TO THE ABOVE, GIVE PARTICULARS INCLUDING COURT AND DATE(S)			
6. GIVE THREE CREDIT REFERENCES IN THE UNITED STATES			
NAME		ADDRESS (No., Street, City, State)	
General Motors Acceptance Corp.		1310 S.W. Yamhill Street, Portland 5, Oregon	
Gulf Oil Corporation		P.O. Box 72-5, Atlanta 9, Georgia	
Hinde Furniture Company		917 Caroline Street, Fredericksburg, Virginia	
7. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT, PENSION OR COMPENSATION FOR MILITARY OR NAVAL SERVICE?		YES	<input checked="" type="checkbox"/> NO
8. IF YOUR ANSWER IS "YES" TO THE ABOVE QUESTION, GIVE COMPLETE DETAILS			
9. DO YOU HAVE ANY FINANCIAL INTEREST IN OR OFFICIAL CONNECTIONS WITH ANY U.S. CORPORATIONS OR BUSINESSES, OR IN OR WITH U.S. CORPORATIONS OR BUSINESSES HAVING SUBSTANTIAL FOREIGN INTERESTS?			
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		(If answer "YES", furnish details on separate sheet.)	
SECTION XII		MARITAL STATUS	
1. PRESENT STATUS (Single, Married, Divorced, Separated, Divorced, or Annulled) SPECIFY: <u>Married</u>			
2. STATE DATE, PLACE AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS			
NA			
WIFE, HUSBAND OR FIANCEE If you have been married more than once - including annulments - use a separate sheet for former wife or husband giving data requested below for all previous marriages. If marriage contemplated, fill in appropriate information for fiancee.			
3. NAME (First) (Middle) (Last)			
Dorothy Anne Arnett Flores			
4. STATE ANY OTHER NAMES EVER USED			
Dorothy A. Moran			
5. DATE OF MARRIAGE			
November 14, 1960 Lima, Peru			
6. HIS OR HER ADDRESS BEFORE MARRIAGE (No. Street City State Country)			
American Embassy, La Paz, Bolivia			
7. LIVING 8. DATE OF DEATH 9. CAUSE OF DEATH			
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
11. CURRENT ADDRESS (Give full address if so desired)			
2423 Connecticut Ave., N.W., 2003, Washington 5, D.C.			
12. DATE OF BIRTH 13. PLACE OF BIRTH 14. CITIZENSHIP			
January 31, 1935 Portland, Oregon United States of A.			

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SECTION XII CONTINUED FROM PAGE 9				
14. IF BORN OUTSIDE U.S. - DATE OF ENTRY		15. PLACE OF ENTRY		
NA		NA		
16. FORMER CITIZENSHIP (Country, etc.)		17. DATE U.S. CITIZENSHIP ACQUIRED		
NA		NA		
18. OCCUPATION		19. PRESENT EMPLOYER (Give full name of employer or if spouse, deceased or unemployed, give last name and address)		
Legal Secretary		Boykin and De Francis Formerly: Department of State		
20. EMPLOYER'S OR BUSINESS ADDRESS (No. Street, City, State, Country)				
1000 14th St., N.W., Suite 601, Washington, D.C.				
21. DATES OF MILITARY SERVICE (From and to - If No. and If)				
None				
22. BRANCH OF SERVICE		23. COUNTRY OF WHICH MILITARY SERVICE AFFILIATED		
24. DETAILS OF OTHER GOVERNMENT SERVICE (U.S. OR FOREIGN)				
Foreign Service - Jan., 1953 - Oct., 1960; Civil Service - Jan., 1961 - June, 1962				
SECTION XIII CHILDREN AND OTHER DEPENDENTS				
1. PROVIDE THE FOLLOWING INFORMATION FOR ALL CHILDREN AND DEPENDENTS				
NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	ADDRESS
None				
2. NUMBER OF CHILDREN (including step-children and adopted children) who are UNMARRIED, UNDER 21 yrs. OF AGE, AND NOT SELF-SUPPORTING.		3. NUMBER OF OTHER DEPENDENTS (including spouse, parents, grandparents, etc.) who are UNMARRIED, UNDER 21 yrs. OF AGE, AND NOT SELF-SUPPORTING.		
0		0		
SECTION XIV FATHER (Give same information as for Self and wife on a separate sheet)				
1. FULL NAME (Last-First-Middle)		2. LIVING		3. DATE OF DEATH
Jose S. Flores		YES		
4. STATE OTHER NAMES HE HAS USED		INDICATE CIRCUMSTANCES (including length of time) UNDER WHICH HE HAS EVER USED THESE NAMES. IF NAME CHANGE, GIVE PARTICULARS, where and by what authority. USE EXTRA SPACE PROVIDED ON PAGE 16 OF THIS FORM TO RECORD THIS INFORMATION.		
None				
5. CURRENT ADDRESS - Give last address, if deceased: No., Street, City, State, Country				
501 S. Guadalupe Street, San Marcos, Texas				
7. DATE OF BIRTH		8. PLACE OF BIRTH (City, State, Country)		9. CITIZENSHIP
December 23, 1903		Mexican		USA
10. IF BORN OUTSIDE U.S. - DATE OF ENTRY		11. PLACE OF ENTRY		
May 24, 1913		Mexico		
12. FORMER CITIZENSHIP (Country, etc.)		13. DATE U.S. CITIZENSHIP ACQUIRED		14. WHERE ACQUIRED (City, State, Country)
Mexican		1913		San Marcos, Texas
15. OCCUPATION		16. PRESENT EMPLOYER (Give full name of employer or if spouse, deceased or unemployed, give last name and address)		
Baptist Minister		Mexican Baptist Church		
17. EMPLOYER'S OR BUSINESS ADDRESS (No. Street, City, State, Country)				
501 S. Guadalupe Street, San Marcos, Texas				
18. BY WHOM KNOWN (Give full name of person by whom known)				19. COUNTRY
To my knowledge never known in any other capacity				
20. DETAILS OF OTHER GOVERNMENT SERVICE (U.S. OR FOREIGN)				

SECTION XV MOTHER (Give same information for Stepmother in separate sheet)			
1. FULL NAME (Last-First-Middle) Flores, Arístida	2. LIVING YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	3. DATE OF DEATH June 1959	4. CAUSE OF DEATH Unknown
5. STATE OTHER NAMES SHE HAS USED None to my knowledge		INDICATE CIRCUMSTANCES INCLUDING DATES WHEN SUCH NAMES WERE EVER USED THESE NAMES IF LEGAL CHANGE GIVE PARTICULARS (Where and by what authority) USE EXTRA SPACE PROVIDED ON PAGE 19 OF THIS FORM TO RECORD THIS INFORMATION.	
6. CURRENT ADDRESS (GIVE LAST ADDRESS, IF DECEASED) (No., Street, City, State, Country) 3, Austin and Lee Streets, San Antonio, Texas			
7. DATE OF BIRTH September 20, 1903	8. PLACE OF BIRTH (City, State, Country) Mar y Morfela, Nuevo Leon, Mexico		9. CITIZENSHIP Mexican
10. IF BORN OUTSIDE U.S.: DATE OF ENTRY Unknown		11. PLACE OF ENTRY Unknown	
12. FORMER CITIZENSHIP(S) (Country(ies)) NA	13. DATE U.S. CITIZENSHIP ACQUIRED NA	14. WHERE ACQUIRED (City, State, Country) NA	
15. OCCUPATION Housewife		16. PRESENT EMPLOYER (Give last employer, if worker is deceased or unemployed) NA	
17. EMPLOYER'S BUSINESS ADDRESS OR MOTHER'S BUSINESS ADDRESS IF SELF EMPLOYED NA			
18. DATES OF MILITARY SERVICE (From-and-To) NA	19. BRANCH OF SERVICE NA	20. COUNTRY NA	
21. DETAILS OF OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN NA			
SECTION XVI BROTHERS AND SISTERS (Including Half-, Step- and Adopted Brothers and Sisters)			
1. FULL NAME (Last-First-Middle) Patlan, Francis	2. RELATIONSHIP Sister	3. CITIZENSHIP (Country) U.S. of America	
4. CURRENT ADDRESS (No., Street, City, State, Country) 631 S. River St., Seabrook, Texas	5. LIVING YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		6. AGE 41
1. FULL NAME (Last-First-Middle) Bentonia, Rachel	2. RELATIONSHIP Sister	3. CITIZENSHIP (Country) U.S. of America	
4. CURRENT ADDRESS (No., Street, City, State, Country) 311 Lathrop St., San Antonio, Texas	5. LIVING YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		6. AGE 39
1. FULL NAME (Last-First-Middle) Black, Rebecca Mary	2. RELATIONSHIP Sister	3. CITIZENSHIP (Country) U.S. of America	
4. CURRENT ADDRESS (No., Street, City, State, Country) 501 S. Guadalupe St., San Marcos, Texas	5. LIVING YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		6. AGE 34
1. FULL NAME (Last-First-Middle) Flores, Samuel	2. RELATIONSHIP Brother	3. CITIZENSHIP (Country) U.S. of America	
4. CURRENT ADDRESS (No., Street, City, State, Country) Rosemary and Oak Sts., Seabrook, Texas	5. LIVING YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		6. AGE 32
1. FULL NAME (Last-First-Middle) Flores, Joe	2. RELATIONSHIP Brother	3. CITIZENSHIP (Country) U.S. of America	
4. CURRENT ADDRESS (No., Street, City, State, Country) 4004 S. 12th St., San Antonio, Texas	5. LIVING YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		6. AGE 27
1. FULL NAME (Last-First-Middle) Flores, Esther	2. RELATIONSHIP Sister	3. CITIZENSHIP (Country) U.S. of America	
4. CURRENT ADDRESS (No., Street, City, State, Country) 1212 E. 12th St., Seabrook, Texas	5. LIVING YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		6. AGE 24
1. FULL NAME (Last-First-Middle) Flores, Douglas	2. RELATIONSHIP Brother	3. CITIZENSHIP (Country) U.S. of America	
4. CURRENT ADDRESS (No., Street, City, State, Country) Seabrook	5. LIVING YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		6. AGE 2
1. FULL NAME (Last-First-Middle) Flores, Juan	2. RELATIONSHIP Brother	3. CITIZENSHIP (Country) U.S. of America	
4. CURRENT ADDRESS (No., Street, City, State, Country) Seabrook	5. LIVING YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		6. AGE 1

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SECTION XVII		FATHER-IN-LAW	
1. FULL NAME (Last, first, middle)	2. LIVING	3. DATE OF DEATH	4. CAUSE OF DEATH
Arnett, Carl Raymond	X YES NO		
5. STATE OTHER NAMES HE HAS USED		INDICATE CIRCUMSTANCES (including length of time) UNDER WHICH HE HAS BEEN USED THESE NAMES. IF LEGAL CHANGE, GIVE PARTICULARS (where and by what authority). USE EXTRA SPACE PROVIDED ON PAGE 15 OF THIS FORM TO RECORD THIS INFORMATION.	
Ray			
6. CURRENT OR LAST ADDRESS (No., Street, City, State, Country)			
4505 Washington St., Milwaukie, 22, Oregon			
7. DATE OF BIRTH	8. PLACE OF BIRTH (City, State, Country)	9. CITIZENSHIP	
January 2, 1909	Minot, North Dakota	U.S. of America	
10. IF BORN OUTSIDE U.S. - DATE OF ENTRY		11. PLACE OF ENTRY	
NA		NA	
12. FORMER CITIZENSHIP (Country)	13. DATE U.S. CITIZENSHIP ACQUIRED	14. WHERE ACQUIRED (City, State, Country)	
NA	NA	NA	
15. OCCUPATION	16. PRESENT EMPLOYER (Give last employer, if Father-in-Law is deceased or unemployed)		
Warehouse Foreman	Rudy Wilhel Inc., Portland, Ore. on		

SECTION XVIII		MOTHER-IN-LAW	
1. FULL NAME (Last, first, middle)	2. LIVING	3. DATE OF DEATH	4. CAUSE OF DEATH
Tompkins, Alma Dean	X YES NO		
5. STATE OTHER NAMES SHE HAS USED		INDICATE CIRCUMSTANCES (including length of time) UNDER WHICH SHE HAS BEEN USED THESE NAMES. IF LEGAL CHANGE, GIVE PARTICULARS (where and by what authority). USE EXTRA SPACE PROVIDED ON PAGE 15 OF THIS FORM TO RECORD THIS INFORMATION.	
Alma Dean Arnett			
6. CURRENT OR LAST ADDRESS (No., Street, City, State, Country)			
13920 S.E. Portland View Place, Portland 36, Oregon			
7. DATE OF BIRTH	8. PLACE OF BIRTH (City, State, Country)	9. CITIZENSHIP	
May 4, 1910	Portland, Oregon	U.S. of America	
10. IF BORN OUTSIDE U.S. - DATE OF ENTRY		11. PLACE OF ENTRY	
NA		NA	
12. FORMER CITIZENSHIP (Country)	13. DATE U.S. CITIZENSHIP ACQUIRED	14. WHERE ACQUIRED (City, State, Country)	
NA	NA	NA	
15. OCCUPATION	16. PRESENT EMPLOYER (Give last employer, if Mother-in-Law is deceased or unemployed)		
Homemaker			

SECTION XIX			
RELATIVES BY BLOOD, MARRIAGE OR ADOPTION WHO EITHER (1) LIVE ABROAD, (2) ARE NOT U.S. CITIZENS OR (3) WORK FOR A FOREIGN GOVERNMENT			
1. FULL NAME (Last, first, middle)	2. RELATIONSHIP	3. AGE	
None to my knowledge			
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		5. EMPLOYED BY	
6. CITIZENSHIP (Country)	7. FREQUENCY OF CONTACT	8. DATE OF LAST CONTACT	
1. FULL NAME (Last, first, middle)	2. RELATIONSHIP	3. AGE	
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		5. EMPLOYED BY	
6. CITIZENSHIP (Country)	7. FREQUENCY OF CONTACT	8. DATE OF LAST CONTACT	
1. FULL NAME (Last, first, middle)	2. RELATIONSHIP	3. AGE	
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		5. EMPLOYED BY	
6. CITIZENSHIP (Country)	7. FREQUENCY OF CONTACT	8. DATE OF LAST CONTACT	
1. FULL NAME (Last, first, middle)	2. RELATIONSHIP	3. AGE	
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		5. EMPLOYED BY	
6. CITIZENSHIP (Country)	7. FREQUENCY OF CONTACT	8. DATE OF LAST CONTACT	

SECTION VII (Continued) FROM PAGE 12			
8. SPECIAL REMARKS, IF ANY, CONCERNING RELATIVES NOTED IN SECTION SIX ABOVE			
NA			
SECTION XX RELATIVES BY BLOOD, MARRIAGE OR ADOPTION WHO ARE IN THE MILITARY OR CIVIL SERVICE OF THE UNITED STATES			
1. NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE	4. CITIZENSHIP
Arnett, Raymond Wesley	Bro-in-law	21	U.S. of America
5. ADDRESS (No., Street, City, State, Country)		6. TYPE AND LOCATION OF SERVICE (If known)	
U.S. Army Depot, Pueblo, Colorado			
1. NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE	4. CITIZENSHIP
Miller, Claude	2nd Cousin	Unknown	U.S. of America
5. ADDRESS (No., Street, City, State, Country)		6. TYPE AND LOCATION OF SERVICE (If known)	
Air Station, Quantico, Virginia		Aviation - 1st S. S. Wing	
1. NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE	4. CITIZENSHIP
5. ADDRESS (No., Street, City, State, Country)		6. TYPE AND LOCATION OF SERVICE (If known)	
SECTION XXI REFERENCES, ACQUAINTANCES, AND NEIGHBORS			
1. LIST FIVE CHARACTER REFERENCES NOT RELATIVES IN THE U.S. WHO KNOW YOU INTIMATELY			
NAME (Last-First-Middle)	BUSINESS ADDRESS (No., Street, City and State)	RESIDENCE ADDRESS (No., Street, City and State)	
Mr. and Mrs. Jose Espinosa	S. Guadalupe St., San Antonio, Texas	San Marcos, Texas	
Rev. Carlos Paredes	First Baptist Church Austin, Texas	Austin, Texas	
Mr. Thaxter L. Goodell	230 E. St., N.W., Washington, D.C.	3740 Jason Avenue, Alexandria, Virginia	
Mr. Alfred Beatty	Dept. of Agriculture The American Embassy, Washington, D.C.	1711 Massachusetts Ave., Washington, D.C.	
Cpl. Michael Hennessey	1111 1st St., Washington, D.C.	172 Bartolome Herrera, Miraflores, Lima, Peru	
2. LIST FIVE PERSONS IN THE U.S. WHO KNOW YOU SOCIALLY, NOT RELATIVES SUPERVISORS OR EMPLOYERS			
NAME (Last-First-Middle)	BUSINESS ADDRESS (No., Street, City and State)	RESIDENCE ADDRESS (No., Street, City and State)	
Mr. Howard Wicklund Jr.	Department of State, Washington, D.C.	Hilltop House, Lullai St., 3671 Section Road, Birmingham, Ala.	
Mr. Max Pine		Birmingham, Ala.	
Miss Mary Ann Newman	Department of State, Washington, D.C.	Allen Lee Hotel, 23rd St., 601 Cascade, Boulder, Colorado	
Miss Ruth P. Stewart		173 Bartolome Herrera, Miraflores, Lima, Peru	
Mrs. Bea Lux			
3. LIST THREE NEIGHBORS AT YOUR MOST RECENT NORMAL RESIDENCE IN THE U.S.			
NAME (Last-First-Middle)	BUSINESS ADDRESS (No., Street, City and State)	RESIDENCE ADDRESS (No., Street, City and State)	
Miss Nancy Payne		402 Hanover St., Fredericksburg, Virginia	
Lt. and Mrs. William Paulman		c/o Leo Felts, Route 1, Hannock, Mo.	

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SECTION XXII CLUBS, SOCIETIES AND OTHER ORGANIZATIONS

NOTE: List names and addresses of all clubs, societies, professional societies, employee groups or organizations of any kind (including membership in or support of any organization having headquarters or branch in a foreign country) to which you belong or have belonged.

NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATES OF MEMBERSHIP	
		FROM	TO
Spanish Club	San Marcos High School, San Marcos, Texas	Sept., 1951	May, 1955
Distributive Education Club	San Marcos High School, San Marcos, Texas	Sept., 1951	May, 1955
Baptist Youth Organization	First Mexican Baptist Church, San Marcos, Tex.	Jan., 1951	1957

SECTION XXIII RESIDENCES FOR THE PAST 15 YEARS

ADDRESS - LAST RESIDENCE FIRST (Number, Street, City, State, Country)	INCLUSIVE DATES	
	FROM	TO
4736 Kenmore Ave., #201, Alexandria, Virginia	March, 1961	Aug., 1961
102 Hancock St., Fredericksburg, Virginia	Dec., 1960	Mar., 1961
172 Bartolomea Herrera, Miraflores, Lima, Peru	Jan., 1960	May., 1960
8818 Building, 3rd & 4th Floors, La Paz, Bolivia	Nov., 1959	Jan., 1960
474 Company, Headquarters Marine Corps, Henderson Hall, Washington 25, D.C.	Sept., 1958	May, 1959
Cold Weather Training Battalion, Pickle Weavers, Alhambra, California	Jan., 1958	Aug., 1958
Marine Corps Base, 23 Palms, California	Dec., 1957	Jan., 1958
Marine Corps Recruit Depot, San Diego, California	July, 1957	Nov., 1957
Marine Corps Base, Camp Pendleton, California	Nov., 1956	Dec., 1957
501 S. Guadalupe St., San Marcos, Texas	May 1956	July, 1957
Howard Payne College, Brownwood, Texas	Sept., 1955	May, 1956
501 S. Guadalupe St., San Marcos, Texas	1954	Sept., 1955

SECTION XXIV		ADDITIONAL INFORMATION	
1. DO YOU ADVOCATE OR HAVE YOU EVER ADVOCATED, OR ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF, OR HAVE YOU EVER BEEN EMPLOYED OR BEEN ASSOCIATED WITH ANY POLITICAL PARTY, INSTITUTION OR ORGANIZATION WHICH ADVOCATES OR TEACHES THE OVERTHROW OF THE GOVERNMENT OF THE UNITED STATES, BY FORCE, VIOLENCE OR OTHER UNLAWFUL MEANS OR SALES OF FORCE OR VIOLENCE TO CERTAIN PERSONS THEIR RIGHTS UNDER THE CONSTITUTION OF THE UNITED STATES?			
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
2. IF YOU HAVE ANSWERED "YES" TO THE ABOVE QUESTION, EXPLAIN:			
3. DO YOU USE OR HAVE YOU EVER USED "INTOCAN"? <input checked="" type="checkbox"/>		4. IF SO, TO WHAT EXTENT?	
5. DO YOU USE OR HAVE YOU EVER USED "NANCOT"? <input checked="" type="checkbox"/>		6. IF SO, TO WHAT EXTENT?	
7. HAVE YOU EVER BEEN A MEMBER OF, OR SUPPORTED OR HAD ANY CONNECTIONS WITH A FOREIGN INTELLIGENCE ORGANIZATION OR ITS ACTIVITIES?		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> IF ANSWER IS "YES", GIVE COMPLETE DETAILS	
8. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED FOR EMPLOYMENT SINCE 1940:			
I served 4 years in the United States Marine Corps.			
9. IF TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAVE CONDUCTED AN INVESTIGATION OF YOU, INDICATE THE NAME OF THE AGENCY AND THE APPROXIMATE DATE OF THE INVESTIGATION.			
An investigation (I do not know by whom) was conducted prior to my departure for Bolivia where I was assigned to the American Embassy. This investigation took place during August and September of 1953.			
NOTE SPECIAL: If your answer to "YES" to the following Questions 10, 11 or 12, provide the information requested for each question on a separate, signed sheet and attach the sheet to this form in a sealed envelope.			
10. HAVE YOU, OR TO YOUR KNOWLEDGE HAS YOUR SPOUSE, EVER BEEN DETAINED, ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF THE LAW OTHER THAN A VIOLATION OF TRAFFIC LAWS IN THE UNITED STATES OR ABROAD?		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, DATE, NATURE OF OFFENSE AND DISPOSITION OF CASE IN ACCORDANCE WITH THE SPECIAL INSTRUCTIONS ABOVE.			
11. HAVE YOU EVER BEEN ARRESTED, COURT-MARTIALED OR OTHERWISE PUNISHED UNDER MILITARY LAW OR REGULATION? IF SO, DESCRIBE INCIDENT(S) AND PROVIDE DATE(S) OF OCCURRENCE ON SEPARATE SHEET IN ACCORDANCE WITH SPECIAL INSTRUCTIONS ABOVE.		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
12. ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE, NOT MENTIONED ABOVE, WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANATION? IF SO, DESCRIBE INCIDENT(S) AND PROVIDE DATE(S) OF OCCURRENCE ON SEPARATE SHEET IN ACCORDANCE WITH SPECIAL INSTRUCTIONS ABOVE.		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
SECTION XXV		PERSON TO BE NOTIFIED IN CASE OF EMERGENCY	
1. NAME (First-Middle-Last)		2. RELATIONSHIP	
Mrs. Daniel Flores		Wife	
3. HOME ADDRESS (No. Street, City, State, Country)		4. HOME PHONE NO.	
2828 Conn. Ave., N.W., Washington 8, D.C.		366-8100	
5. BUSINESS ADDRESS (No. Street, City, State, Country) - INDICATE NAME OF FIRM OR, EMPLOYER, IF APPLICABLE		6. BUSINESS PHONE NO. & EXT.	
Boydin and De Francis 1000 15th St., Suite 603, Washington 5, D.C.		DI 7-5444	
7. IN CASE OF EMERGENCY, OTHER CLOSE RELATIVES (Mother, Father) MAY ALSO BE NOTIFIED IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS. PLEASE SO STATE.			
In all cases wife: Relative, Mrs. Vicente Paltan, 631 S. River St., Seguin, Texas Telephone FR 9-1007			

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SECTION XVII		CERTIFICATION	
<p>YOU ARE INFORMED THAT THE CORRECTNESS OF ANY STATEMENT MADE IN THIS APPLICATION WILL BE INVESTIGATED.</p> <p>I have read and understand the instructions. I Certify that the foregoing answers are true and correct to the best of my knowledge and belief. I agree that any misstatement or omission as to a material fact will constitute grounds for immediate dismissal or rejection of my application. I also understand that any false statement made herein may be punishable by law (U.S. Code, Title 18, Section 1001).</p>			
<p>DATE OF SIGNATURE <i>September 5, 1961</i></p>		<p>SIGNATURE OF APPLICANT <i>Daniel Flores</i></p>	
<p>SIGNED AT (City and State) <i>Washington, District of Columbia</i></p>		<p>SIGNATURE OF WITNESS <i>Lawrence Coolidge</i></p>	
<p>NOTE: Use the following space for extra details. Reference each continued item by section and item number to which it relates. Sign your name at the end of the added material. If additional space is required use extra pages the same size as this page and sign each such page.</p>			
<p>MARITAL STATUS: Item #4, Section XII September 1, 1956 to October 6, 1956. Married to Lt. Col. Joseph G. Moran in Portland, Oregon, by Circuit Court Judge. Used name of Moran until November 14, 1960, when changed to Flores.</p>			
<p>FATHER-IN-LAW: Item #5, Section XVII Short name for Raymond</p>			
<p>GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL: Item #1, Section VI</p>			
<p>Argentina 2 July 1959 to 3 July 1959 Travel</p>			
<p>Panama 10 November 1958 to 13 November 1958 Travel</p>			
<p>SEE ATTACHED SHEET FOR PERTINENT INFORMATION RELATIVE TO STEP-MOTHER.</p>			
<p>Signed at Washington, D. C., this <u>7th</u> day of September, 1961.</p>			
<p><i>Daniel Flores</i> Daniel Flores</p>			

ATTACHMENT TO FORM NO. 444 - PERSONAL HISTORY STATEMENT

Section XV - STEPMOTHER

Full name: Concepcion R. Flores
Living: Yes
Other Names She Has Used: None to my knowledge
Current Address: 501 S. Guadalupe Street, San Marcos, Texas
Date of Birth: December 9, 1914
Place of Birth: Mexico
Citizenship: Mexican
If Born Outside U.S. - Date of Entry: December 8, 1922
Place of Entry: Unknown
Former Citizenships: None
Occupation: Homemaker and Missionary
Present Employer: Mexican Baptist Church, San Marcos, Texas
Never served in Military or other Government service to my knowledge.

This paper is attached to and hereby made a part of Form No. 444.

Daniel Flores
Daniel Flores

CONFIDENTIAL
(WHEN FILLED IN)

SECURITY APPROVAL

DATE : 19 January 1962

YOUR
REFERENCE: 07100 OPEER

CASE NO. : 195221

TO : Director of Personnel

FROM : Director of Security

SUBJECT : FLORES, Daniel

1. This is to inform you of security approval of the subject person as follows:

☒ Subject has been approved for the appointment specified in your request under the provisions of Regulations 10-210 and 20-730 including access to classified information through Top Secret as required in the performance of his duties.

☐ Subject has been approved for appointment under the authority of Paragraph 4(d) of Regulation 10-210, and under Regulation 20-730 including access to classified information through Top Secret as required in the performance of his duties.

2. Unless arrangements are made within 60 days for entrance on duty within 120 days, this approval becomes invalid.

3. As part of the entrance on duty processing:

☒ A personal interview in the Office of Security must be arranged.

☐ A personal interview is not necessary.

☐

FOR THE DIRECTOR OF SECURITY:

W. A. Osborne
Chief, Personnel Security Division

OFFICE OF PERSONNEL SECURITY

FORM NO 1173 REPLACES FORM 10-101
1 MAR 57 WHICH IS OBSOLETE

CONFIDENTIAL

(6)